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BOROUGH OF SPENBOROUGH





ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

For the Year

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WILLIAM MASON DOUGLAS, M.B., Ch.B., D.P.H.

Medical Officer of Health



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Borough of Spenborough Constitution 1958-59

HIS WORSHIP THE MAYOR (Alderman P. FAWCETT, J.P.)

The Deputy Mayor (Councillor F. E. WILDE).

Aldermen-

G. BLACKBURN, J.P., F.T.I.
F. A. BROWN
D. PAGE, B.A., Dip. Ed.
H. ROBINSON
T. W. SHAW, B.E.M., J.P.,

H. SIDDLE
A. W. SMITH
W. STILLINGFLEET
A. R. STOCKHILL

Councillors—

L. ARCHER J. JUDSON E. LEACH H. G. BENNETT W. H. LOWE A. COCKSHOTT W. CORDINGLEY H. OXNARD M. P. PAGE (Mrs.) M. M. CROWTHER G. W. PARRETT W. P. DENTON K. PEEL J. DEWHIRST B. PRIESTLEY B. FARROW R. SEWELL R. FRAZER I. SHARPE (Mrs.) R. S. GRAY H. SHAW (Mrs.) F. HARRIS H. de LACY TAYLOR R. C. HARTLEY, F.I.M.I., F. WAKERLEY M.A.E.T. A. HOLROYD (Mrs.) E. WHITELEY (Mrs.) E. S. WILLIAMSON G. HOLROYD

HEALTH COMMITTEE, 1958-1959.

HIS WORSHIP THE MAYOR (Alderman P. FAWCETT, J.P.).

Chairman : Alderman H. SIDDLE.

Vice-Chairman: Councillor J. DEWHIRST.

Councillors—

A. COCKSHOTT

F. HARRIS

A. HOLROYD (Mrs.)

G. HOLROYD

M. P. PAGE (Mrs.)

B. PRIESTLEY

I. SHARPE (Mrs.)

E. WHITELEY (Mrs.)

To the Mayor, Aldermen and Councillors of the Borough of Spenborough.

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to submit to you my Annual Report relating to the Borough of Spenborough for the year 1958, and have as in previous years included information concerning the health services provided by the West Riding County Council in the District.

Within the general body of the report are many pages of statistics, and short explanatory notes have been added where appropriate to bring the salient points more readily into focus. Taken in the context of a single year many of them are of limited value, since in dealing with a small population such as Spenborough, fluctuations from year to year are inevitable; but they do show something of the work carried out by the Health Department staffs, and over long periods may point to trends of behaviour in health and social conditions. These activities should be viewed as part of the general picture of a National Health Service which is a product of the desire of the mass of the people for an ever greater measure of physical and mental well being, for ready help in time of sickness, for the prevention of disease and disability, and for support for those afflicted by infirmity due to old age or other causes. As such we are living in an era of unparalleled achievement and advance.

In the field of diagnosis and treatment more and more diseases are yielding up their secrets and responding to the marvels of medical science and technique. The surgery of the heart and of the brain, the treatment of tuberculous meningitis and of coronary artery disease, the replacement of the blood of the "Rhesus" baby, the rehabilitation of the aged sick, the increasing success in the treatment of mental illness, the recognition of the harmful effects of radiation and the medical use of radio-active isotopes are but a few instances.

Equally in the sphere of public health or social medicine great changes are taking place. They are in general less dramatic but not less important. Thus the great decline in maternal and infant mortality allows us to turn more of our time and thought to the problems arising from the large numbers of people living on into old age, and to the elaboration of services to meet them, so that to become old is not necessarily to become useless or lonely or unable to continue life in the general community and in one's own home. Experience is showing that certain of the disabilities common in the aged can be prevented or delayed by recognition of early symptoms and by appropriate preventive action. This applies, for example, to certain types of blindness, to the mental and physical effects of a qualitatively inadequate diet, and to some of the deformity and loss of function resulting from rheumatism and arthritis. The experiment of special "well" clinics for elderly people developed sometimes in association with Health Centres is an interesting approach to this subject. Both the health visitor and the home helps as well as the voluntary agencies such as the Old People's Welfare Committees, with their social clubs, friendly visiting, chiropody services and meals on wheels, are playing and will continue to play an ever greater part in the care of the aged.

The increasing success of the treatment of many types of mental illness is accompanied by recognition of the fact that it is not very often necessary to shut patients up in hospital, but indeed that most with adequate support are socially adaptable and are happier and respond more quickly within the general community. This concept is still comparatively new, and its rapid and successful development will depend to some extent at least, on the ability to recruit and train sufficient numbers of suitable doctors and social workers for the task which lies ahead. It is, however, to the prevention of mental illness that most thought should be given, and perhaps in particular to the part played by experience in childhood and adolescence, in sowing the seeds of later trouble.

There is, too, a greater desire and certainly need for health education throughout all sections of the people and there will have to be evolved a more effective pattern for this than exists at present. If at the moment we are concentrating primarily upon children at school it is because they are the easiest to approach in numbers, and it appears logical to attempt to stimulate thought which may serve them well in later years when they have families of their own. It could quite well be, for example, that by education about the part played by cigarette smoking in the production of cancer of the lung we may save more lives than the most gifted surgeon or physician. The same applies too, in relation to Home Safety. The appalling number of accidents, many of them fatal, which occur every year in the homes of the people, which cause so much distress and bear most heavily upon the very young and the very old, are largely preventable, and it is most encouraging that many local authorities are now sponsoring Local Voluntary Committees to tackle the subject.

While medical science has produced for us vaccines which have already almost abolished diphtheria, and others which we hope may do likewise in regard to whooping cough, tetanus, tuberculosis and poliomyelitis, they have to be applied to the community to be effective, and it is through the public health services primarily that these vast vaccination campaigns can be most speedily implemented.

In the environment of the people, too, there are signs of great improvement and of a gathering momentum of advance. The concept of smokeless air throughout the country with the benefits which this will have on health, and particularly towards the prevention of bronchitis which has come to be known as the "English Disease," is fascinating. It will be indeed a task of staggering magnitude but one to which many other things should, if necessary, be subordinated. The slum clearance and housing improvement programmes are going well but must not lag. The public generally are much more interested and more insistent that progress should be made in these matters, just as they have now accepted the importance of food hygiene following the public health campaigns within the past few years.

These again are but a few of the lines of advance in public health. There are many more and very many questions to which we do not yet know the answers. One thing is certain, and that is that unless there is complete co-operation between all branches of the health service it will largely fail to attain its objectives. There is in my mind

no doubt that this is more fully understood now than it has ever been before and that most of the old prejudices are crumbling. There is a great need to continue with experiment in administration. What suits the circumstances and the conditions of one area may not be the most effective pattern for another, and this applies equally to the general practitioner, hospital services and the public health services. There is generally, however, still much scope for their integration into a comprehensive whole.

Within Spenborough we have again enjoyed the most helpful cooperation from general practitioners, hospital staffs, teachers at schools and the many other people with whom we come into almost daily contact during the course of our work and we are all very grateful for this. I must again thank Mr. Templeman, the Chief Public Health Inspector, for his loyalty and co-operation throughout the year as well as for compiling that part of the report relating to the sanitary circumstances of the area and the work of the sanitary department. I am also grateful for the courteous reception and helpful support which the Health Committee have accorded to me throughout the year.

I am, Mr. Mayor, Ladies and Gentlemen,

Your obedient servant,

W. M. DOUGLAS,

Medical Officer of Health and Divisional Medical Officer.

POPULATION AND SOCIAL CONDITIONS.

The population of the Borough of Spenborough according to the Registrar General's estimate at the middle of 1958 was 36,620, and this figure is used throughout this Report in calculating rates.

The district, although mainly industrial in nature, contains much open space and a fair amount of agricultural land. There are over four hundred factories in the district but only about ninety of these employ more than twenty persons. Although processes connected with the woollen textile industry are the predominant industry, a great diversity of manufacture is carried on. There is the advantage in this that the whole community can not be affected by recession in any one branch of industry. The small size of many of the factories renders very difficult the establishment of an effective industrial medical service, but within recent years development of welfare schemes, canteens, etc., in the larger factories has proceeded in a most satisfactory manner. Owing to the way in which the Authority was formed by the amalgamation of a number of pre-existing townships population has tended to be concentrated in comparatively small aggregates rather than spread evenly throughout the district, but this is disappearing year by year owing to the movement within the Borough of large sections of the community into new housing estates.

In the Spen Valley area, during most of the year 1958, the employment position in the area was worse than it had been for some time. The industry mainly affected was the textile industry in which there was a considerable amount of short-time working. To a lesser extent other industries were involved, e.g., in building which normally suffers some recessions in the early part of the year, early in 1958 the position seemed to be worse than usual, whilst engineering, wire manufacturing and the card clothing industry all had their setbacks.

In 1958 two or three firms closed down their factories in this area. In some cases they transferred the work to other branches and in other cases they ceased production completely.

However, by the end of the year, the position improved and although there was less overtime being worked in the engineering industry, the textile industry no longer had many workers on short-time.

When unemployment was at its highest, the number of registered unemployed workers represented 1.5% of the total insured population, this being the highest figure recorded for several years, but even so we were more fortunate than the people in the surrounding districts.

I am indebted to the Manager of the Spen Valley Employment Exchange for the information regarding employment in the district.

BOROUGH OF SPENBOROUGH.

Area of district in acres at 1951 census	•••	8,253
Population at 1951 census	•••	36,981
Number of inhabited houses at 1951 census	• • •	12,396
Average number of persons per room at 1951 census	•••	0.83
Number of families at 1951 census	• • •	12,450

Statistical Summary of the area for 1958 in comparison with 1957.

	195	7 1958
Area of the district in acres	8,25	3 8,253
Estimated population (mid-year)	36,56	0 36,620
Average number of persons per acre .	4.	5 4.5
Estimated number of dwellinghouses .	13,41	0 13,402
Average number of persons per house .	2.	8 2.8
Rateable value at 1st April	£277,75	0 £288,760
Product of Penny Rate (estimate)	£109	0 £1130
Crude Death Rate per 1,000 estimate population	12·	8 13.2
Comparability Factor	1 ·	$01 \qquad 1 \cdot 01$
Standardised Death Rate	13.0	13.3
Crude Birth Rate per 1,000 estimate population	d 13·	5 15.0
Comparability Factor	1.0	04 1.04
Standardised Birth Rate	14.0	15.6
Still-birth Rate per 1,000 total live and still		
births	$23 \cdot 8$	$3 \qquad 24 \cdot 9$
Infant Mortality Rate per 1,000 live births	$28 \cdot 4$	1 21 · 9
Maternal Mortality Rate	Ni	l Nil

The Comparability Factors for births and deaths are supplied by the Registrar General and when the crude rates are multiplied by these factors the resulting rate is that which would apply if Spenborough had the same age and sex constitution as the country as a whole.

VITAL STATISTICS FOR THE YEAR 1958.

Live Births.	(Registere	ed)			Males	Females	Total
Legitimate	• • •		• • •	•••	281	252	533
Illegitimate	•••	•••	•••	•••	11	4	15
			Total	•••	292	256	548

Birth rate per 1,000 estimated population: $15 \cdot 0$.

Stillbirths.					Males	Females	Total
Legitimate	•••	•••	• • •	• • •	4	10	14
Illegitimate	•••		•••	•••			
			Total		4	10	14

Stillbirth rate per 1,000 total live and still-births: 24.9.

Infant Mortality	•				Males	Females	Total
Legitimate	•••	•••	•••	•••	7	4	11
Illegitimate	• • •		•••		1		1
			Total	•••	8	4	12

Infant Mortality Rate per 1,000 live births: 21.9.

The birth rate at $15 \cdot 0$ per 1,000 population, although higher than last year's very low figure of $13 \cdot 5$, was again lower than the average for similar areas in the County $(16 \cdot 3)$ but at least the 548 births exceeded the number of deaths by 64. Of these 548 births only 100 were born in their own homes. The remainder, almost 82%, being born in neighbouring hospitals or maternity homes.

Of the twelve stillbirths, one was associated with toxaemia of pregnancy, three with abnormality of the unborn child, one with Rhesus antibody formation, and four with premature labour, and in three cases there was no apparent cause.

The infant mortality rate of $21 \cdot 9$ per 1,000 live births was again quite satisfactory as was the neo-natal mortality rate of $14 \cdot 6$. The causes of infant deaths are shown in the table on page 13.

There have been no deaths of mothers due to childbirth in Spenborough since 1955.

CAUSES OF AND AGES AT DEATH DURING THE YEAR 1958.

	1		1		1	1	1	1	1			1
	All Ages	Under 1 year	1-4	5—14	15—24	25—44	45—64	65—74	75 and Over	Males	Females	Deaths in Institutions
Tuberculosis respiratory Syphilitic disease Other infective and parasitic disease Cancer—	$\begin{vmatrix} 4\\2\\1 \end{vmatrix}$					1	$\begin{bmatrix} 1 \\ 2 \end{bmatrix}$	$egin{bmatrix} 2 \\ 1 \end{bmatrix}$		4	$\begin{vmatrix} 2 \\ 1 \end{vmatrix}$	4 2
(a) Stomach (b) Lung, bronchus (c) Breast (d) Uterus (e) Other Leukaemia	$ \begin{array}{ c c c } 12 \\ 25 \\ 9 \\ 1 \\ 38 \\ 2 \\ 2 \end{array} $					$\begin{bmatrix} 2\\3\\1 \end{bmatrix}$	$\begin{array}{ c c } & 4 \\ 12 \\ 2 \\ 1 \\ 10 \\ 1 \\ 1 \end{array}$	3 7 1 13 1	5 4 3 14	$\begin{bmatrix} 6 \\ 22 \\ 20 \\ 2 \\ 1 \end{bmatrix}$	6 3 9 1 18	$egin{array}{c} 2 \\ 12 \\ 2 \\ 18 \\ 2 \\ 2 \\ \end{array}$
Vascular lesions of nervous system Coronary angina Hypertension with heart	70 98					1 1	16 35	17 31	36 31	$\begin{bmatrix} 1\\20\\58 \end{bmatrix}$	1 50 40	$egin{array}{c} 2 \ 28 \ 22 \ \end{array}$
disease Other heart disease Other circulatory disease Pneumonia Bronchitis Other disease of respiratory	7 65 35 19 34	2				2 2	1 7 4 5 7	$egin{array}{c} 2 \\ 17 \\ 10 \\ 6 \\ 12 \\ \end{array}$	$ \begin{array}{ c c } 4 \\ 39 \\ 19 \\ 6 \\ 14 \end{array} $	$egin{array}{c} 2 \\ 25 \\ 18 \\ 10 \\ 27 \\ \end{array}$	$\begin{bmatrix} 5 \\ 40 \\ 17 \\ 9 \\ 7 \end{bmatrix}$	3 13 15 9 13
system	$\begin{bmatrix} 2\\2\\1\\9\\3\\1 \end{bmatrix}$	1					2	$\frac{1}{2}$	1 7 3	1 1 3 1	1 1 1 8	2 1 1 2
Other defined & ill defined causes Motor vehicle accidents All other accidents Suicide	25 1 7 9	8				$egin{array}{cccccccccccccccccccccccccccccccccccc$	$\begin{bmatrix} 2 \\ 1 \\ 3 \end{bmatrix}$	$egin{array}{cccccccccccccccccccccccccccccccccccc$	$egin{array}{c} 7 \ 6 \ 2 \ \end{array}$	$\begin{bmatrix} 1 \\ 13 \\ 3 \\ 6 \end{bmatrix}$	12 1 4 3	5 2
TOTAL—All Causes	484	12				16	118	137	201	244	240	160

The 484 deaths produce crude death rate of $13\cdot 2$ deaths per 1,000 population, and again as in previous years, this is slightly higher than the average for the County (11·9). The most noticable feature of these statistics is the comparatively high number of deaths from coronary and other heart disease, from respiratory disease principally bronchitis and from the higher than usual number of deaths from cancer of the lung. Only 42% of all deaths occurred at 75 years of age and over.

CAUSES OF INFANTILE MORTALITY IN THE BOROUGH OF SPENBOROUGH, 1958.

In First Year	63	, ¬		က	က	_		12
4th Quarter	1							67
3rd Quarter				П			Н	67
2nd Quarter			П		63	1-11-11-11-11-11-11-11-11-11-11-11-11-1		က
lst Quart er	1	-		Ø1	П			7.0
12 months								
Il months								
10 months								1
9 months								
8 months						-		-
7 months								
8 months								
g months								
f months		-						-
3 months	-							
28 days—2 months								
21—28 days								•
14—20 (lays								
2-13 days								
0 days								
g quàs								
4 days		-						
3 days								
2 days								
І дау								
Under 1 day			П	<u>က</u>				9
	:	:	:	:	:	÷	se	
ath	onia	:	cts	:	:	:	rrhag	[.S
of De	neumonia		defects	.y		ase	aemo	TOTALS
Cause of Death	ho-pr	hitis	nital	ıturit	tasis	dise	ral H	F
Ů	Broncho-pn	Bronchitis	Congenital	Prematurity	Atelectasis	Heart disease	Cerebral Haemo r rhage	

Birth and Mortality Rates for 1958 for the West Riding Administrative County and England and Wales.

	Aggregate of U.D's.	Aggregate of R.D's.	Adminis- trative County	England & Wales	Spen- borough
Crude Birth	1 6 · 3	18.0	16.7	16.4	15.0
Adjusted Birth	16.4	18.0	16.9	16.4	1 5 · 6
Crude Death	12 ·8	9.8	11.9	11.7	13.2
Adjusted Death	13.3	12.1	13.0	11.7	13.3
Tuberculosis, Respiratory	0.09	0.09	0.09	0.09	0.11
Tuberculosis, Other	0.01	0.00	0.01	0.01	
Tuberculosis, All Forms	0.09	0.09	0.09	0.10	0.11
Cancer	2.11	1.62	1.97	2 ·12	$2 \cdot 38$
Vascular Lesions of the Nervous System	2 · 13	1.41	1.93	•	1.91
Heart and Circulation	5.00	3 · 53	4.59	•	5.60
Respiratory Diseases	1.40	1.13	1 .33	•	1.50
Maternal Mortality	0 · 41	0.48	0.43	0.43	
Infant Mortality	2 3 · 2	27 • 4	24 · 4	2 2 · 5	21.9
Neo-Natal Mortality	16.2	18.6	16.9	16.2	14.6
Stillbirth	23.0	22 · 3	2 2 · 8	21.6	$24 \cdot 9$

^{*}Figures not available.

The Infant and Neo-natal Mortality Rates are per 1,000 live births.

The Maternal Mortality and Stillbirth Rates are per 1,000 live

The remaining rates are per 1,000 estimated home population.

and stillbirths.

PREMATURE INFANTS.

Given below are details of live premature infants born at home and in hospital:—

(1) The number of premature babies notified during the year whose mothers are normally resident in the Council's area ... 39 (2) The total number of premature babies notified during the year that they were born :— (a) at home . . . 5 in hospital or nursing home 34 (3) The number of those born at home:— (a) who were nursed entirely at home 5 who died during the first 24 hours (b) l who survived at the end of one month 4 (4) The number of those born in hospital or nursing home: who died within the first 24 hours 5 who survived at the end of one month

Table showing Birth Weights of Premature Infants.

29

(b)

Disset la XXI vi vi la la	No. of	No. of Infants who survived					
Birth Weight in pounds	Infants	24 hours	2-7 days	1 month			
Under 2	2						
$egin{pmatrix} 2 & - 2rac{1}{2} \ 2rac{1}{3} & - 3 \end{bmatrix}$	1	_					
$\frac{3}{21} - \frac{3\frac{1}{2}}{4}$		$\frac{1}{2}$		$-\frac{1}{2}$			
$egin{array}{cccccccccccccccccccccccccccccccccccc$	$\frac{3}{7}$	7	7	7			
$egin{pmatrix} 4rac{1}{2} & -5 \ 5 & -5rac{1}{2} \ \end{pmatrix}$	$\begin{array}{c c} & 4 \\ 22 \end{array}$	$\frac{3}{21}$	$\frac{3}{21}$	$\frac{3}{21}$			
Totals	39	33	33	33			

IMMUNISATION AND VACCINATION.

Community immunisation in this country is at present directed to the prevention of diphtheria, tetanus, poliomyelitis, smallpox and tuberculosis.

Diphtheria Immunisation.

A high level of protection against diphtheria has been obtained, and it will be seen that almost 90% of children under the age of 15 years have been immunised at one time or another. The percentage immunised under one year of age is very low and this is due to the timing procedure which we have adopted in the past for the various inoculations. During the year 416 children received primary inoculations and 513 received reinforcing injections.

Type of Injection	Age	at Final Injec	Total	
	Under 1	1—4	514	Total
Primary Injection Re-inforcing Injection	263	89	64 511	416 513

I give below a table showing the numbers and percentages of children who have had a course of immunisation within the last five years separated from those who had a course of immunisation previously:—

Age at 31-12-58 i.e., Born in year:	Under 1 1958	1—4 1957–1954	59 1953-1949	10—14 1948–1944	Under 15 Total
Last complete course of injections (whether primary or booster) A. 1954-1958	58 (11%)	1296 (66%)	1234 (46%)	1506 (49%)	4094 (56%)
B. 1953 or earlier	<u></u>		912 (34%)	1288 (4 1%)	2200 (30%)

Whooping Cough Immunisation.

Until this year we have been using separate material for immunisation against whooping cough, but we have now started using combined injections against whooping cough, diphtheria and tetanus. Whooping cough vaccination is only offered to children under four years of age. During the year 318 children completed a course of

immunisation, and it will be seen that approximately 34% of children under one year and 66% of children between one and four years of age had received protective inoculation. Although we are now combining anti-tetanus injections with diphtheria and whooping cough no figures are available of the percentage of immunisation against this disease.

The following table shows the amount of Whooping Cough Immunisation carried out during the year:—

Age at final injection

Under 6 months	
6 months to 1 year	251
1—2 years	58
2—3 years	6
3—4 years	3
	318

Whooping Cough Immunisation in relation to Child Population.

Number of children at 31st December who had completed a course of immunisation at any time before that date.

Age at 31/12/58 i.e. Born in year	Under 1 1958	1-4 $1957-1954$	5—9 1954-1949	10—14 1948-1944	Under 15 Total
Number immunised	183	1116	727	27	2053

Smallpox Vaccination.

There was a very good response to primary vaccination against smallpox this year and 57% of the children born in the year were so protected.

Table showing Persons Vaccinated and Re-vaccinated during 1958.

Age at date of vaccination	Under 1	1	2—4	5—14	15 or over	Total
Number Vaccinated	260	16	8	16	10	310
Number Re-Vaccinated	4			2	59	65

Poliomyelitis Vaccination.

During the greater part of the year poliomyelitis vaccination was available only to children between six months and fifteen years of age, to expectant mothers and to certain other classes of persons at special risk. Owing to the greater availability of the vaccine it was possible to speed up greatly the vaccination of persons within these classes who had previously registered. The tables show that 2,856 persons received two injections and that 50% of children from one to four years and 44% of children from five to nine and 52% of children from ten to fourteen years have been protected by two injections. It was then recommended that fuller protection would be afforded by a third injection seven months following the second, and it is obvious that this together with an extension of the age groups of persons eligible for vaccination will make very heavy demands upon the nursing and medical staffs of the Health Department.

Ages	Under 1 1958	1—4 1957-1954	5—9 1953-1949	10—14 1948-1943	Expect- ant Mothers	Other Adults	Total
Vaccinated during 1958	18	887	578	1187	91	95	2856

In addition to the above, 757 children and 5 adults received a third injection.

The following table shows the number in Spenborough who had received two injections by the end of the year.

1958	1957-1954	1953-1949	1948-1943	Others	Total
18 (3%)	988 (50%)	1176 (44%)	1616 (52%)	186	3984

Vaccination Against Tuberculosis.

Vaccination against tuberculosis is available to certain contacts of cases of tuberculosis, especially young infants, and also to school-children of 13 years of age. The former are carried out by the Chest Physicians at the general hospitals, and the details of our school programme are given in the section relating to School Health for the sake of convenience.

CASES OF INFECTIOUS DISEASE

		4		22	11		16	-		_		1	18	20
	orough	က		45	19	9	ro		1				13	89
1958.	Spenborough	63		67	က	က	_			4	ಣ	2	ಣ	98
		1		49	-		4			್ದ			4	81
Quarters,		4			က		G					П	4	18
ss and	Gomersal and Birkenshaw	က		<u></u>	19		87			<u> </u>			П	29
to Areas	Gomer	63		29	-									30
		1		26	1		က			67				32
ပ	own,	4		H	9		7			—			6	25
classified ac	Liversedge, Roberttown, Hartshead and Norristhorpe	ಣ		34		9	က						-	45
igh cla		7		32	67	က	_			_	61		23	43
Spenborough	Liver	1		38			_						23	42
of Spenb	vorth 1	4			63						•		ΣĊ	7
Borough (Cleckheaton, Hunsworth Oakenshaw and Scholes	က		4										15
e Bor	heaton, Hu Sakenshaw Scholes	23		9						ಣ	_	কা	-	13
in the	Cleck	7		ಣ						23			6.1	
occurring			CONTROL STREET, TRACTOR	:	•	विदेश कार्यक्ष हुन्ति कार्यक्रम	#17979@00@00##1894.@00 * *	•		•	•	CONTROL CONTRO	:	**************************************
090	Disease			Chicken Pox	Measles	Dys ntery	Scarlet Fever	Poliomyelitis P.	Poliomyelitis N.P.	Pneumonia	Meningococcal Meningitis	Erysipelas	Whooping Cough	TOTALS

Except for a moderate prevalence of chicken-pox spread over the first nine months of the year there was no epidemic of infectious disease during the year. One case of paralytic poliomyelitis was notified in a child of 4 years, the child had not been immunised but fortunately the paralysis was not severe and a good recovery was anticipated.

CASES OF INFECTIOUS DISEASE

29
80
19
70
41
25
7
13
19
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173
86
11
306
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TOTALS
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TUBERCULOSIS.

The year saw a further slight decline in the number of cases on the register, but not in the number of new cases notified. It is significant that five of the ten new male cases were discovered in men over sixty four years of age which may prove to be a new trend in notifications. Tuberculosis in elderly persons may often be highly infectious and dangerous to others because sometimes unsuspected for prolonged periods.

We are continuing our efforts to protect younger children by tuberculin testing of five and eight year olds at school and by the B.C.G. vaccination programme among the thirteen year olds.

The statistical details of Tuberculosis in Spenborough are as follows:—

		Pulm Male	onary Female		lmonary Female
(a)	Number of Cases on Register at commencement of year	59	46	4	16
(b)	Number of Cases notified first time during the year	10	1	3	1
(c)	Removals from other areas	2	1		60.00 Paris
(d)	Number of Cases removed from the Register	9	3	2	1
(e)	Number of Cases remaining on the Register	62	45	5	16

Seven notifications were received of admission of persons suffering from Tuberculosis to Sanatoria and four discharges.

The following are the Institutions to which patients were sent:—

			Admissions Form I	Discharges Form II
Killingbeck Hospital, Leeds			1	1
Whitley Grange Hospital	• • •	• • •	1	1
Staincliffe General Hospital		• • •	1	
Middleton Hospital		• • •	2	2
St. Luke's Hospital			2	
			7	4

		New	Cases		Deaths				
Age Periods	Respin	catory		n- ratory	Respi	ratory	Non- Respiratory		
	M.	F.	M.	F.	M.	F.	M.	F.	
0									
1				<u> </u>					
5			1	—					
10	-	1	1			_	<u> </u>		
15			1						
20	_			—			-		
25	2	—	_	1		_			
35 45	$egin{bmatrix} 2 \\ 1 \\ 2 \end{bmatrix}$			T] <u>I</u>				
55	2				1				
64 and									
upwards	5				2	-	-		
Totals	10	1	3	1	4	_			

MASS RADIOGRAPHY SURVEY.

The Mass Radiography Unit of the Leeds Regional Hospital Board visited the district in November and held public sessions at Cleckheaton, Gomersal and Hightown. I give below the results supplied to me by the unit. It is not possible, however, to draw any conclusions at all from such evidence since the persons examined constitute only a small proportion of the population and are not necessarily representative of the population taken as a whole. The information given is in respect of people actually examined during the survey and may, therefore, include persons normally resident in other areas.

			Males	Females	Total
1.	Examinations carried out.		111 4163	1 entates	1 Olai
	(a) Miniature X-rays taken		1475	803	2278
	(b) Number re-called for large film	• • •	54	7	61
2.	Analysis of Provisional Findings.				
	(a) Cases of active Tuberculosis		1	0	1
	(b) Cases of inactive Tuberculosis		8	2	10
	(c) Other abnormalities (see below)	• • •	20	4	24
	(d) Failed to re-attend for large film		1	1	2
3.	Analysis of Abnormalities other the Tuberculosis (2(c) above).	nan			
	Bacterial or Virus Pulmonary Infection	ons	1	0	1
	Bronchiectasis		1	2	3
	Emphysema		1	0	1
	Pulmonary fibrosis: non-tuberculous		5	0	5
	Pneumoconiosis		5	0	5
	Benign Neoplasms of Lung and				
	Mediastinium	• • •	1	0	1
	Primary Malignant Neoplasms	• • •	1	0	1
	Pleural thickening		2	0	2
	Cardiovascular lesions: acquired	• • •	3	2	5

MENTAL HEALTH SERVICES.

This has been a very satisfactory year so far as the mental health service is concerned. There has been a good level of ascertainment and supervision of mental defectives, and we have been able to obtain employment or admission to the Dewsbury Occupation Centre for all of those in whose case it was a practicable proposition.

With regard to mental illness, co-operation between the general practitioners, the hospital staffs and the mental health social worker has again been excellent with the result that quite often the mental health worker has been called in to deal with cases in an advisory capacity before they have reached the stage of referral to the psychiatrist. Mrs. de la Cour has again attended also at the psychiatric out-patient clinic at Staincliffe and this has been invaluable in fostering the essential integration of the hospital, practitioner and public health services in this sphere of medicine.

Mental Deficiency Statistics.

1.	Number of defectives on register: (a) at home (b) in institutions	Males 28 26	Females 29 12	Total 57 38
		${54}$	41	95
2.	Number of defectives under supervision at home:			
	(a) Statutory Supervision	25	26	51
	(b) Voluntary Supervision	3	3	6
	(c) On licence from institutions		—	
	Total under supervision	28	29	57
3.	 (a) Number of defectives in gainful employment (b) Number attending Occupation Centre (c) Number awaiting admission to Institution 	15 s 6	7 7 —	22 13
4.	Placed under supervision in 1958	1	1	2
	Placed under guardianship in 1958			**********
6.	Admitted to Institution in 1958	4	1	5
7.	Admitted to Occupation Centres 1958	1	2	3
8.	Visits paid during 1958:— (a) To cases on Licence (b) To Cases under Statutory Super-		_	
	vision (c) To cases under Voluntary Super-	337	329	666
	vision	2	3	5
	(d) For Home reports for institutions	$2\overline{4}$	8	32
	Total Visits	363	340	703

Mental Illness Statistics.

	Males	Females	Total
No. of patients discharged from mental hospitals during 1958	7	29	36
No. of reports on home conditions submitted to clinic, hospitals, etc	18	19 ?	37
Number of visits made to patients during 1958	221	198	419
The Duly Authorised Officer dealt with Spenborough during the year:—	the follo	owing cases	from
		Females	Total
Certified	2	3	5

HOME NURSING SERVICE.

Voluntary patients ...

The domiciliary nursing service has again been freely sought and although there were fewer visits paid this year than last the number of cases attended was slightly larger. The bulk of the work is in connection with the home nursing care of the aged and chronic sick, but with the earlier discharge of patients from hospital there is also an increasing amount of nursing required to complete treatment. Co-operation between the District Nurses and the General Practitioners and liaison with other members of the Public Health staffs has been excellent. There have been no outstanding problems and suitable equipment, sometimes of a very specialised nature, has been readily available when required.

1.	No. of cases visited of	during 19	958—				
	(a) Medical cases .		•••	• • •	• • •	•••	497
	(b) Surgical		•••	• • •	• • •	• • •	109
	(c) Infectious disease	es	• • •	• • •		• • •	
	(d) Tuberculosis .						4
	(e) Maternal complic	ations	• • •		• • •	• • •	5
		Total	•••	• • •	• • •	• • •	615
2.	No. of visits paid du	iring 195	8 to-				
	(a) Medical cases .		• • •	• • •			13,032
	(b) Surgical cases .		• • •				2,774
	(c) Infectious disease	es	• • •				
	(d) Tuberculosis .		• • •		• • •		194
	(e) Maternal complic	cations	•••	•••	• • •	• • •	43
		Total v	isits paid		•••		16,043

DOMICILIARY MIDWIFERY AND ANTE-NATAL CLINICS.

As in previous years over 80% of the new births in Spenborough took place in Maternity Homes or Hospitals and the domiciliary midwives attended 100 cases in patient's own homes as shown below. In addition the midwives made ante-natal visits, attended the Ante-Natal Clinics in the Divisional area, and conducted classes for expectant mothers in relaxation techniques and in education for motherhood. No undue problems were encountered and good co-operation was obtained from the General Practitioners and Hospital staffs.

Dr. No	t Booked	Dr.	Total No. of	
Present Not Present		t Present Not Pres		Cases
-	20	4	76	100

(b)	Ante-natal visits				590
(c)	Post-natal visits		• • •	• • •	2,096
(d)	No. of cases receiving 1		alone	• • •	2
(e)	No. of cases receiving (Gas & Air	alone		54
(f)	No. of cases receiving	Gas & A.ir	& Peth	idine	27

The midwives sought medical aid on 44 occasions, details of which are given below:—

(i)	Pregnancy	• • •	• • •			5
(ii)	Labour	• • •		• • •	• • •	12
(iii)	Lying-in	• • •		• • •	• • •	10
(iv)	The child	•••		•••	• • •	17

Pregnancy.

Antepartum haemorrhage	3	General condition	• • •	2
Labour. Retained Placenta Ruptured Perineum	1 10	Foetal Distress		1
Lying in. Post-partum Haemorrhage Breast condition Pyrexia	$\frac{3}{1}$	Chest condition Phlebitis		1 1

The Child

Eye condition		12	Deformity			1
General condition		2	Jaundice			ī
Umbilical condition	• • •	1	Jadnaice	•••	•••	

Attendances at Ante-Natal Clinics:— Elm Bank Clinic	Ante- Post Natal Natal 301 19 324 15 ear 625 34
Number of women who attended during th	e
year:—	70
Elm Bank Clinic	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$
Valley Road Clinic	61 15
Total during the year	ear 119 34
Number of women attending for the first time	e :—
Elm Bank Clinic	40 19
Valley Road Clinic	41 15
Total during the y	ear 81 34

Relaxation Classes.

The relaxation classes held by Nurse Broadley continued during the year until she resigned in September. Up to that time 20 patients made 74 attendances. It is hoped that one of the other midwives will soon receive training in the giving of relaxation exercises.

Dental Treatment of expectant and nursing mothers :—

• • •	• • •	42
• • •	• • •	41
• • •	• • •	1
	• • •	<u></u>
• • •	• • •	1
•••	• • •	1
• • •	• • •	34
• • •	• • •	5
• • •		4
•••		13
• • •	• • •	200
• • •	• • •	45
• • •	• • •	16
• • •	• • •	17

HEALTH VISITING AND CHILD WELFARE.

Only part of the scope of the health visitors' duties are shown by the statistical returns of their visits, etc., during the year. The amount of visiting has been well maintained in spite of the heavy programme of immunisation sessions especially for poliomyelitis. It will be seen, however, that the main emphasis of the work was again placed on the visiting of infants in their own homes during the first year of life, and for this reason clinic attendance has not been so necessary as it would otherwise have been. However, the next few years will show that this visitation of infants will be considerably reduced and replaced to some extent at least by work among the aged population. It is expected that the clinic attendances will consequently begin to increase again. The figures also show something of the considerable amount of health education carried out by the health visitor.

Nu	mber of visits paid	by healt	h vis	itors di	uring yea	ar :—	
	To expectant moth					1957	1958
	(i) First visits (ii) Total visits		• • • •	•••	•••	$\begin{array}{c} 53 \\ 94 \end{array}$	45 78
(b)	To children under	l year of	f age	:			
	(i) First visits(ii) Total visits	•••		•••	•••	479 7, 71 6	500 7,908
(c)	To children betwee years:—	n the age	es of o	one a nd	lfive		
	(i) Total visits	•••		• • •		1,949	1,461
(d)	To other classes :-	_					
, ,	(i) Total visits	•••	• • •	•••	• • •	3,673	4,115
(e)	No. of attendances	at Clini	cs	• • •	• • •	823	995
(f)	No. of parentcraft	lectures		• • •	•••	127	122
(g)	No. of visits to sch cleanliness surve		medic	al insp	•	minor ailm 904	ents, 968
(h)	No. of home visits	in conne	ection	with s	chool-ch	ildren 254	267

INFANT WELFARE CENTRES.

ical ations	Over 1	age	09	123	88	27	15	22	285
Medical Consultations	Under 1	age	401	378	192	148	113	106	1338
Total	during	year	1191	1043	006	602	241	493	4470
ss during hildren tendance	0 Lt	z but under 5	40	89	2	9	4	10	135
Number of attendances during the year made by children who at the date of attendance were:	1 1+	under 2	189	179	173	137	99	86	842
Number o the year who at th	100	Under 1 yr.	962	796	720	459	171	385	3493
Total Number of Children	attended	during the year	159	158	69	70	36	09	552
ildren during	in	1956-3	24	43	က	4	ಣ	9	83
Number of children who attended during	were born in	1957	42	48	22	21	∞	Ϊ́Ω	156
•		1958	93	29	44	45	25	36	313
Number of children who first attended during the year Number of and who at Infant their first	were under	l year oi age	115	93	73	46	38	39	404
Number of Infant	Sessions	now held per month	4	4	4	જા	1	©1	17
			Elm Bank, Cleckheaton	Valley Road Clinic	Birkenshaw Clinic	Scholes Clinic	Roberttown Clinic	Gomersal Clinic	TOTALS

During the year 3,082 tins of National Dried Milk, 18,187 bottles of Orange Juice, 2,456 bottles of Cod Liver Oil and 1,757 packets of Vitamin Tablets were issued.

PROBLEM FAMILIES.

A register is kept in the Department of those, fortunately comparatively few, families in the district which are considered to need special attention and follow-up for their own good, and in particular, in order to prevent neglect of the children. In these duties of supervision, the staff work in close co-operation with the officials of the National Society for the Prevention of Cruelty to Children, with the School Welfare Officers and with the other agencies which are available to assist in these cases.

So far as the care of the children is concerned, neglect is the principal cause for concern, and this usually in the form of lack of cleanliness, and failure to provide adequate clothing, bed clothing, etc. There can be little doubt that whereas a complete cure is seldom to be expected, supervision by trained staff does much to prevent the disruption of these families, and leads at least to an acceptable minimum of living standards in the majority of cases.

The following is the record of work which has been maintained in connection with problem families current on our Health Department register:—

On register beginning 1958	• • •	• • •	• • •	•••	16
Removed from district	• • •	• • •	• • •	•••	2
Added to Register	•••		•••		1
Removed from Register	• • •	• • •	• • •		4
Total on Register at end of 1958	• • •		• • •	• • •	13
Re-housed	• • •		• • •	• • •	1
Visits paid by Health Visitors	•••				83
No. of school children involved	• • •	• • •	• • •	• • •	29
No. of pre-school children involve	ed				16
No. of babies born	• • •		• • •		5
No. of stillbirths					

HOME HELP SERVICE.

The home help service continued along the same lines as last year, and there was an increase in the number of cases attended and in the number of hours worked. However, nobody has gone without for very long when the need for such help was obvious, and although a service of this type is extremely difficult to administer, no major problems have arisen. Once again a glance at the figures reveals the benefit which aged and chronic sick persons are receiving from this service. They constitute over 85% of the cases.

Reason for Provision	No. of Cases	Hours worked	Percentages
Maternity	18	1,489	2.9
Tuberculosis Aged Chronic Sick			
Over 65	284	42,483	84 · 2
Under 65	15	1,865	$3 \cdot 7$
Others	38	4,612	9.2
Totals	355	50,449	100

CONVALESCENT HOME TREATMENT.

Under Section 28 of the National Health Service Act, 1946, the County Council is empowered to provide convalescent home treatment. General Practitioners recommend those who are in need of this service and during the year 11 Spenborough residents were admitted to the following Homes:—

Yorkshire Foresters, Bridlin	gton			3
"Binswood," Didsbury	• • •	• • •	• • •	2
Metcalfe Smith House, Harr	ogate	• • •	• • •	2
West Hill, Southport	• • •		• • •	2
"South Bay," Bridlington	•••	• • •	• • •	1
Semon Home, Ilkley	• • •			1

SCHOOL HEALTH SERVICE.

The following pages relate to the various aspects of the school health service in Spenborough during the year. They show that in spite of many additional duties it has been possible to carry out a full programme without additional staff.

The physical condition of the general body of school children is extremely satisfactory, and the number of defects discovered at routine school medical inspections is really very small having regard to the number of children examined. All such cases are, of course, followed up by observation or by referral to the general practitioner or hospital service for further investigation or treatment.

Forty-six special examinations were carried out during the year and the number of recommendations for special education indicate that the level of ascertainment of special disability is highly satisfactory. What is also satisfactory is that it has now become much easier to implement our recommendations for special educational treatment, and this is particularly so in the case of educationally sub-normal children, with the opening of the Day Special School at Hartshead Moor in April. Details of this aspect of the work are given on page 34 of the report.

The results of tuberculin jelly testing and of B.C.G. vaccination are shown on pages 39 and 40. It is disappointing to record that the parents of only 53% of the 13 year old children eligible for the B.C.G. vaccination scheme gave their consent. We also had disappointing results this year arising from the use of a new Freeze Dried Vaccine of insufficient potency resulting in 70% conversion to a positive tuberculin test compared with a virtual 100% in previous years. Considerable correspondence has taken place with the manufacturers and with The Ministry on this point and it is unlikely that such disappointing results will occur again.

As a matter of interest a list of the subjects dealt with by the health visitors in their routine lectures to senior girls at the Secondary Modern Schools is given on page 68. 122 of these talks were given during the year.

Classification of the Physical Condition of Children Examined at Routine Medical Inspections.

Age Groups Inspected (By Years of	Number of Pupils			Unsatisfactory		
Birth)	Inspected	Number	Percentage	Number	Percentage	
	1					
1954 and later	4	4	100.00			
1953	373	365	$97 \cdot 85$	8	$2 \cdot 15$	
1952	121	114	$94 \cdot 21$	7	$5 \cdot 79$	
1951	247	244	98.79	3	1 • 21	
1950	360	346	$96 \cdot 12$	14	3.88	
1949	60	56	93.33	4	$6 \cdot 67$	
1948	5	5	$100 \cdot 00$			
1947	43	43	100.00			
1946	283	282	99.65	1	$0 \cdot 35$	
1945	132	131	$99 \cdot 24$	1	0.76	
1944	65	65	$100 \cdot 00$			
1943 and earlier	191	189	98.95	2	1.05	
TOTAL	1884	1844	97.87	40	2 · 13	

Total number of children who have been re-examined for follow-up defects 242

During the year 43 free issues of dietary supplements were made to school children where recommended by the School Medical Officer.

The following table shows the number and type of defects discovered at the routine School medical inspections:—

Defects Table.

		15 Jan 15 17 A	
Defects	Recommended for Treatment	Recommended for Observation	Totals
Skin Ears:	12	28	40
(a) Hearing	1	13	14
(b) Otitis Media	$\dot{12}$	30	42
(c) Other	_	2	2
Nose and Throat	22	48	70
Speech	3	12	15
Lymphatic Glands		34	34
Heart and			
Circulation	4	38	42
Lungs	12	37	49
Developmental:	0	24	07
(a) Hernia	$\frac{3}{18}$	$egin{array}{c} 24 \ 32 \end{array}$	$\begin{bmatrix} 27 \\ 50 \end{bmatrix}$
(b) Other	18	32	
Orthopaedic: (a) Posture	17	4	21
(b) Feet	72	69	141
(c) Other	17	62	79
Nervous System:			
(a) Epilepsy	2	1	3
(b) Other	3	6	9
Psychological			0.2
(a) Development	1	31	32
(b) Stability		26	27
Other defects	3	1	4
Abdomen			
Totals	203	498	701

SPECIAL EXAMINATIONS.

In accordance with the requirements of the Education Act, 1944. a number of children have been referred by the Education Authority which has necessitated the arrangement of special examinations. During the year 43 children were examined involving 46 examinations altogether. The following recommendations for special education were made:— Education in a School for the Deaf 1 . . . Education in a Day School for Educationally Subnormal 12 Pupils Special Education in an ordinary school 9 Referred to the Child Guidance Clinic ... 4

Reported to Local Authority for the purposes of the Mental
Deficiency Acts—
Section 57 (3) (incapable of receiving education at school)
Section 57(5) (require supervision after leaving school) ... 2

Education in a School for Physically Handicapped Pupils

Education in a School for Spastics Education in an Open Air School for Delicate Children

During the year the following admissions to special schools were made:—

1

3

During the year the following discharges from special schools were made:—

The following table shows the number of children from Spenborough receiving, and those awaiting, education in special schools at 31st December, 1958:—

Type of School	No. of children receiving special education	No. of children awaiting special education
Open Air School for Delicate Children	1	2
School for Partially Sighted	Î	~
School for the Blind	Ī	
School for the Deaf	4	
Epileptic Colony	I	
Home Tuition	I	
School for Physically Handi-	0	
capped	3	
School for Spastics	1	1
Day School for Educationally	25	0
Subnormal Pupils Hostel for Maladjusted	35	9
Residential School for Educa-	1	
tionally Subnormal Pupils	8	

CONSULTANT EYE CLINIC.

The following statistics give detail	ls of th	e cases	s exami	ned:—	
Number of children examined for	the fir	st tim	e	• • •	159
Number of re-examinations	•••	•••	• • •	• • •	426
Total number of attendances	• • •	• • •	• • •	• • •	585
Number of sessions held during the	he year	•	• • •	• • •	5 2
Number for whom spectacles were	e presc	ribed	for first	time	83
Number for whom spectacles wer	e pres	cribed	subsequ	uently	188
Number referred for other treatm	ent	• • •	• • •	• • •	5
Number referred for operative tre	atmen	t	•••		1

MINOR AILMENTS CLINIC.

Minor ailments are treated by the nurses both at the clinics and in the schools. The following table gives details of such treatments during 1958:—

Minor Ailment						No.	treated
Skin:							
Ringworm—boo	dy	• • •	•••	•••			
Scabies	•••		• • •		• • •	• • •	
Impetigo	• • •	• • •			• • •	• • •	3
Other skin disea	ases	•••	•••		• • •		5
Eye Disease:							
(External and o	other,	but ex	cludin	g squint	erro	ors of	
refraction and o				``			2
Ear Defects:							
Otitis media				•••			
Otorrhoea	•••			• • •			
Other	•••	• • •	• • •	• • •	• • •	• • •	
Miscellaneous	•••	• • •	•••	• • •	• • •	• • •	353
(e.g., minor inju	iries,	bruises	s, sores	, chilbla	ins, e	tc.)	
				Total			363
				1 (7. d.i	• • •	•••	
Total number of a	attend	lances	at Au	thority'	s Mi	nor	
Ailment Clinics		• • •	• • •	• • •	• • •		365
							Market of the same

ULTRA VIOLET LIGHT CLINIC.

Total No. o	f session	ns hel	d	•••	• • •	• • •	70
No. of session	ons held	I wee	kly	• • •	• • •	• • •	2
No. of cases	treated	1	•••	• • •	• • •	• • •	29
No. of treat	ments	•••	• • •	• • •	• • •	• • •	278
Average nu	mber of	atte	ndances	per ses	ssion	• • •	4
Average len	gth of c	ourse	of treat	ment	(se	ssions)	9
No. on regis	ster at e	end of	f year	• • •	•••	•••	4
Details of c	ases tre	ated	:				
Debility	• • •	• • •				• • •	10
Bronchitis	• • •						3
Recurrent c	olds	• • •	• • •			• • •	8
Asthma & I	Bronchi	tis	• • •	• • •	• • •	• • •	2
Catarrh	• • •	•••	•••	• • •	•••	• • •	4
Poor dentit	ion	• • •	• • •	• • •	•••	•••	1
Furunculosi	.s	• • •	• • •	• • •	• • •	•••	1
							29

DENTAL INSPECTION AND TREATMENT OF SCHOOL CHILDREN.

Sessions devoted to inspection in	schools 19
Sessions devoted to treatment	
Sessions devoted to administering (
Anaesthetics at Batley Dental C	
No. of children inspected	0000
No. of children offered treatment	1901
No. of children treated	1795
No. of attendances	3482
Anaesthetics.	
Local	572
General	675
Temporary Teeth.	
Extractions	
Septic	1593
For Orthodontia	356
Fillings	45
Dressings	4
Permanent Teeth.	
Extractions	
Septic	724
For Orthodontia	85
Fillings	\dots 2105
Dressings	138
Root Fillings	7
Crowns, inlays, etc	13
Scaling and gum treatment	43
Dentures	16
Orthodontic Cases.	
Not. of patients	
No. of attendances	392
Pre-School Children.	
No. inspected by Dental Officer	61
No. of attendances for treatment	67
No. of extractions	
No. of fillings	
No. of general anaesthetics adminis	stered 65

SPEECH THERAPY CLINIC.

No. of half-day sessions	• • •	26					
No. of new cases treated					• • •	• • •	4
No. of cases attending for	or trea	tment	from 1	oreviou	s year		18
Total number of cases to	reated	• • •	•••	• • •	• • •		22
No. of cases awaiting tre	eatmen	it at ei	nd of y	ear	• • •	• • •	2
No. of visits made to sch					• • •	• • •	
No. of home visits					• • •	• • •	
Analysis of Cases Treate	d:				Boys	G:	irls
Stammerers	•••	•••	•••	•••	2	-	
Defects of Articulation	n—						
(a) Dyslalia	•••	• • •	• • •	• • •	14		4
(b) Sigmatism				•••	2		1
(c) Rhinolalia, due				•••	1		1
Defective speech due to				•••	-		
sub-normality		Cation	CLI		1	_	
Analysis of Cases Discha		• • •	• • •	•••	1		
					F		9
Discharges during yea			• • •	• • •	5		3
Speech normal			•••	• • •	$\frac{2}{2}$		$\frac{2}{2}$
Speech improved	• • •	• • •	• • •	• • •	3		I

CONSULTANT PAEDIATRIC CLINIC.

Dr. M. F. G. Buchanan of the Department of Child Health, Leeds University, attended Elm Bank Clinic in a consultant capacity and during the year seventeen sessions were held. Cases were referred to him both from the Assistant County Medical Officers and from General Practitioners in the area.

I give below details of attendance	es and	the type	es of c	ases see	n:
No. of sessions held during the y No. of individual patients seen:	rear		•••		17
(a) Pre-school children			•••		2
(b) School children		• • •			45
Total number of attendances		•••	• • •		88
Types of cases seen:					
(a) Heart and Circulatory Syste	m	• • •	• • •	• • •	4
(b) Respiratory System, including	ng E.I	N.T. defe	ects	• • •	4
(c) Psychological				• • •	1
(d) Mental defect, including Edu	ucatio	nal Subi	norma	lity	2
		• • •			1
(f) Epilepsy				• • •	1
(g) Developmental	• • •			• • •	7
(h) Incontinence	• • •		•••	•••	27
		Total	• • •	•••	47

CHILD GUIDANCE CLINIC.

	Boys	Girls	Total
No. of new cases seen during year	13	1	14
No. of cases continuing attendance from last year	7	4	11
No. of cases recommended and placed for residential treatment in hostels for maladjusted			
children	1		1
No. of cases continuing treatment in 1959	6	_	6
Intelligence assessments carried out by			
Psychologist	2	1	3

PHYSIOTHERAPY CLINIC.

The Physiotherapist continued to attend Elm Bank Clinic for two half-day sessions a week, and during the year 92 half-day sessions were held. The following table shows details of attendance and type and number of defects referred:—

No. of children on register 1st J	January,	1958		• • •	4 2
No. of children referred for trea	tment	•••	•••	•••	108
Total number of attendances	•••	•••	•••	•••	1212
Total number of treatments	•••	•••	•••	• • •	1240
No. of children discharged	• • •	•••	• • •	• • •	107
No. of children on register 31st	Decemb	per, 198	58	•••	43

Defect					No.
Asthma	•••		•••	• • •	12
Bronchitis	 • • •	• • •	•••	• • •	7
Postural	• • •		•••	• • •	21
Flat feet	• • •	•••	•••	• • •	103
Breathing	Exercises	•••	•••	• • •	3
Knock kne	e			• • •	2
Kyphosis	• • •	• • •	•••	• • •	2

150

CHIROPODY CLINIC.

The chiropodist continued to hold two half-day sessions a week one at Elm Bank Clinic and one at Valley Road Clinic and during the year 95 half-day sessions were held, at which 380 individual patients were treated. These patients received a total of 1,425 treatments. The following table gives the types and numbers of treatments given -—

Defects.		No.	Defects.	No.
Hallux Valgus	• • •	70	Underlying/Overlapping	
Corns and Callas		92	Toes	82
Nail Conditions		30	Verrucae	60
Weak Foot	•••	20	Hallus Rigidus	8
Septic Conditions	•••	18		

B.C.G. SCHEME.

The following is a statistical summary of the results of the scheme for the year:—

for the year.						
No. of thirteen year olds of	• • •	414				
No. offered testing and va	• • •	414				
No. found to have been va	accinate	d previ	ously	• • •	• • •	5
No. of acceptances	·	• • •		•••	• • •	216
Percentage of acceptances		• • •	• • •		• • •	53 %
No. of children tested	•••	• • •	• • •			216
Result of Heaf test:—						
(a) Heaf Positive			• • •		• • •	55
(b) Heaf Negative	• • •	• • •		• • •	• • •	161
Percentages :—						
(a) Heaf Positive		•••	• • •		• • •	25.5%
(b) Heaf Negative	•••		• • •		• • •	$74 \cdot 5\%$
No. of children vaccinated	d	•••	• • •			161
No. of final conversion Te	ests giver	at Tv	velve M	Ionths		136
No. of conversions at twe	lve mont	ths	• • •	• • •		96

TUBERCULIN JELLY TESTING OF SCHOOL ENTRANTS AND EIGHT-YEAR OLDS.

Tuberculin jelly testing of school entrants and eight year olds continued as a routine measure throughout the year. A letter of explanation and consent form was sent by the teachers with the Form N.P. to the children in these groups when they were due for medical examination at school. These were returned to the school and the school nurse applied the tuberculin and control jelly to those children whose parents had consented to this procedure being carried out, three days before the school medical inspection was due to be held. The School Medical Officers read these results when the children were presented for medical inspection and the implications were explained to the parents. Where the jelly test proved to be positive, the children were invited to the school clinic for a further skin test and, where this again proved to be positive, the tuberculosis visitor was informed and she arranged for follow-up of the child and contacts at the chest clinic.

I give below the results of the jelly tests for the year ended 31st December, 1958:—

		New Er	ntrants				Boys	Girls	
Numb	er offered	jelly tes	sting	•••	•••		270	213	
	er of accep	-	-	• • •	• • •	•••	249	188	
	ntage of ac			• • •	•••		92%	88%	
Resul	t of test:								
	positive	• • •	• • •	• • •	•••	•••	10	4	
	negative				•••		239	184	
Percer	ntage:								
	positive	• • •	• • •	•••	• • •	• • •	4%	2%	6
*	negative	• • •		• • •		• • •	96%	98%	
` '	t of final s	kin test	:				, -	·	
	positive		• • •	•••			3	3	
(b)	negative	• • •	• • •		• • •		6	2	
` '		7/8 Yea	r Olde				Boys	Girls	
>T 1				•			•		•
	per offered		_	• • •	• • •	•••	320	298	
	per of acce	-		• • •	• • •	• • •	286	269	/
	ntage of a	сергацо	ces	• • •	• • •	• • •	89%	90%	0
	t of test:						20	22	
	positive	• • •		• • •	• • •	•••	$\frac{20}{200}$	22	
(0)	negative	• • •	•••	• • •	•••	•••	266	247	
	ntage:								,
1	positive	• • •	• • •	• • •	• • •	• • •	7%	8%	
<i>(b)</i>	negative	•••	•••	• • •	•••	•••	93%	92%	o
Resul	t of final s	kin test	:						
(a)	positive	• • •	• • •		• • •		14	8	
(b)				•••		• • •	6	13	
	number o					• • •	• • •		28
	number of						•••		03
Num	per of New	Cases of	of Tube	erculosis	Disco	vered			Nil

CLEANLINESS INSPECTIONS.

Three routine inspections were carried out at each school by the school nurses and a total of 13,039 inspections and re-inspections were carried out. 386 individual children, were reported to be unsatisfactory on 508 occasions but it should be pointed out that in the majority of cases the degree of infestation is extremely light.

The remedial procedure adopted on the discovery of these defects is to notify the parents informally in the first instance, visiting if necessary to give advice on the methods of dealing with infestation. If cure is not effected the nurse visits the home and interviews the parents, and finally, if it is evident that insufficient care is being exercised, the Statutory Notice under the Education Act, 1944, is sent requiring the child to be cleansed to the satisfaction of the Medical Officer or of the person appointed by him for that purpose within 48 hours. No Statutory Notices were issued during the year.

The section of the work which follows, relating to the Public Health Circumstances of the area and the work of the Public Health Inspectors, has been compiled by Mr. J. F. TEMPLEMAN, Chief Public Health Inspector.

FACTORIES ACT, 1937.

Factories (Mechanical and Non-Mechanical).

There are 352 factories in the area. Of these 252 are factories with mechanical power and 100 without. 17 inspections and revists were made to these premises and the following improvements were carried out:—

Improvements.

Provision of artificial lig	ghting in W.C's	 	• • •	3
Provision of satisfactory	7 conveniences	 	• • •	10

Outworkers.

11 persons in the district were notified to the Department during the year. Of these 1 was engaged in making wearing apparel and 10 were engaged in burling and mending, for firms outside the district. 2 visits were made to the premises used by these outworkers.

INSPECTION AND SUPERVISION OF FOOD.

A SALE OF MILK

Δ.	OIL.	LE OF MILK.	
1.	The	Milk and Dairies Regulations, 1949.	
	Dis	stributiors of Milk residing in the area	55
	Dis	tributors of Milk residing outside the area	11
	(a)	The Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949-53.	
		Dealers' Licences to sell Pasteurised Milk	29
		Supplementary Licences to sell Pasteurised Milk	14
		Dealers' Licences to sell Sterilised Milk	72
		Supplementary Licences to sell Sterilised Milk	10
	(b)	The Milk (Special Designation) (Raw Milk) Regulations, 1949-53.	
		Dealers' Licences to sell Tuberculin Tested Milk	26
		Supplementary Licences to sell Tuberculin Tested Milk	14

2. The Milk and Dairies Regulations, 1949.

Details of contraventions:-			
Unsatisfactory premises	 	 	 1

A pint bottle of pasteurised milk delivered to a customer in the district, was found to contain a quantity of broken glass. The matter was taken up with the Company concerned and instructions were issued to guard against further occurrences of a similar nature.

3. Milk Sampling.

The following tables show the number and results of samples taken by the Department:—

			Satisfactory	Unsatisfactory	Total
Pasteurised	• • •	•••	3		3
Tuberculin Tested		• • •	3		3
Tuberculin Tested (Pasteurised)	• • •	•••	1	_	1
Sterilised	•••		1	www.minter	1
			8	_	8
				-	

4. Examination for Bacillus Tuberculosis and Brucella Abortus.

During the year 2 samples of milk were submitted for examination for tuberculosis and 1 sample of milk for examination for brucella abortus. All were negative.

B. MEAT INSPECTION.

The following table shows the number of animals slaughtered at the Public Abattoir, Liversedge. One Inspector is employed full-time at the Abattoir to ensure 100% inspection:—,

Month		Beasts	Sheep	Pigs	Calves	Goats	Total
January		431	1245	346	16	overvalled the	2038
February		3 83	1128	3 50	17	vervaluitie	1878
March		433	1197	411	16		2057
April		289	1123	331	21		1764
May	• • •	3 90	1182	218	8	**************************************	1798
June		386	1346	227	6	**************************************	1965
July	• • •	336	1405	194	8	**************************************	1943
August	• • •	332	1232	178	14	**********	1756
September		352	1314	259	15	**********	1940
October		357	1097	331	20		1805
November		354	985	345	17		1701
December	• • •	338	1010	577	20		1945
		4381	14264	3767	178	_	22590

Carcases Inspected and Condemned.

		Bull- ocks	Cows and Heifers	Calves	Sheep and Lambs	Pigs
Number killed	••	3265	1116	178	14264	3767
Number inspected	••	3265	1116	178	14264	3767
All diseases except T.B.						
Whole carcases condemned	••	1	3		12	3
Carcases of which some part or organ was condemned Percentage of the number in-	••	62	18		66	25
spected affected with diseases	••	1.93%	1.88%		0.54%	0.74%
Tuberculosis only.						
Whole carcases condemned	•••	1				1
	•••	89	6			8
Percentage of the number in- spected affected with Tuber- culosis Number of cases of Cysticercus	••	2.75%	0.53%			0.24%
Bovis included in the above	••					

Total weight of meat condemned during the year was:-

				Tons	cwts.	qrs.	lbs.
Tuberculosis	 •••	• •		1	15	3	13
Other diseases	 •••		• • •	2	6	2	26
				4	2	2	11

Condemned meat was sold to the firm of Messrs. Mitchell & Broadbent, Beacon Hill Road, Halifax.

Slaughter of Animals Act, 1933.

Slaughter of Animals (Amendment) Act, 1954.

32 licences were granted for the purpose of slaughtering or stunning animals in a slaughterhouse or knackersyard.

45 inspections were carried out and 2 notices served.

Slaughterhouses Act, 1958.

The above Act came into operation in August. It deals with the following:—

- 1. Licensing of Slaughterhouses.
- 2. Licensing of Slaughterhouses where local restrictions are in force.
- 3. Reports on Slaughterhouse facilities.
- 4. Grant of new licences.
- 5. Regulation of Slaughterhouses and Knacker's Yards.

The Slaughterhouses (Hygiene) Regulations, 1958.

These Regulations deal with hygienic construction, layout and equipment of slaughterhouses and the practices to be observed therein. The Regulations came into force for all new slaughterhouses on 1st January, 1959, but for existing slaughterhouses, Parts II and III and three of the requirements of Part IV will not come into operation until the date appointed by the Minister for the authority's area following the submission of the report required by Section 3 of the Slaughterhouses Act, 1958. They are designed to secure the observance of sanitary and cleanly conditions in the construction and operation of slaughterhouses and the handling of meat therein. They impose upon occupiers of slaughterhouses and others requirements as to the construction, layout, drainage, equipment, maintenance, cleanliness, ventilation, lighting, water supply, management and personal hygiene.

The Slaughter of Animals (Prevention of Cruelty) Regulations, 1958.

These Regulations came into force on the 1st January, 1959. The principal new provisions are :—

- 1. For the slaughter of adult cattle the provision and use of stunning pens is made compulsory. (Not in force in existing slaughterhouses until dates to be appointed).
- 2. Special precautions are to be taken with horned cattle and fractious animals.
- 3. Animals must not be kept in fields awaiting slaughter when conditions are severe.
- 4. Local authorities may make licences for new slaughtermen conditional upon their slaughtering only under supervision of someone more experienced.

Slaughter of Animals Act, 1958.

This Act, which came into force on the 18th January, 1959, consolidates the Slaughter of Animals Act, 1933, the Slaughter of Animals (Pigs) Act, 1953, and sections of the Slaughter of Animals (Amendment) Act, 1954, and of the Slaughterhouses Act, 1958.

Public Abattoir.

Erection of the new lairage was completed during the year at a cost of £12,000. The building is of brick with an asbestos roof and is 90' long and 56' wide. There are two sorting bays on opposite sides of the building, one giving access from Headlands Road and the other by road from Halifax Road and from the British Railways sidings.

The floors and passages are of concrete and the pen partitions are reinforced with steel. Roof steelwork is protected from rust by having a mixture of asbestos and cement sprayed on under pressure.

The lairage provides accommodation for the following animals:—

Tie-ups for single animals (Bulls, fractious animals

and cows) 15 Beasts
Beast pens (13 including one sorting bay) ... 104 Beasts
Sheep and pig pens (5) 190 Sheep or

Note: The sheep and pig pens are of the same construction as the beast pens but with rails closer together. It is, therefore, possible to use these pens for beasts if it is found necessary.

The following lairage accommodation is available in addition to the new lairage:—

Open lairage for sheep (Abattoir Yard) 200 Covered lairage for pigs (Abattoir) 75

C. INSPECTION OF OTHER FOODS.

(a) The following unsound food was inspected and condemned during the year. This food was disposed of in the Corporation's controlled tips:—

			Lbs.
Canned meat	• • •		$1267\frac{3}{4}$
Canned fish	• • •	• • •	$84\frac{3}{4}$
Canned poultry			$107\frac{1}{2}$
Canned fruit	• • •	• • •	2694
Canned tomatoes			$283\frac{1}{2}$
Canned vegetables	• • •		$538\frac{1}{2}$
Canned cereals and puddings			60
Canned jams and preserves		• • •	$35\frac{1}{4}$
Canned soups and purees	• • •		$167\frac{1}{2}$
Canned milk and cream			$64\frac{1}{2}$
Bacon and ham	• • •		238
Sauces and mayonnaise	• • •	•••	$2\frac{1}{4}$
			$\frac{-}{5543\frac{1}{2}}$

2 tons 9 cwts. 1 qr. 27 lbs. 8 ozes.

(b) 8 samples of ice cream were submitted for bacteriological examination. These were graded as follows:—

Grade 16SatisfactoryGrade II1SatisfactoryGrade IV1Unsatisfactory

(c) Samples taken by West Riding County Council Weights and Measures Department.

Two milk samples were found to be slightly deficient in fat content and warnings were sent to the producers.

A sample of pork sausage was found to contain only $56\cdot3\%$ of meat, and a caution was given to the butcher concerned.

(d) The following Department:—	samples	were	also	taken	by t	he He	ealth
1 Sample of from 1 Sample of Chi	inese liqu	uid egg		Satisfac	ctory		
1 Sample of em				,,			
1 Sample of syn 1 Sample of mu		ream		"			
1 Sample of mo				,,			
- The state of the		~ T~ T~ T & T	CTP.C	,,			
D. INSPECTION OF The following table s				food pr	eparin	g pren	nises
in the area:—				F	· F	O P	
Bakehouses				• • •	• • •	• • •	13
Fish Frying						•••	49
Ice Cream Manufact					• • •	• • •	$\frac{1}{119}$
For the Sale of Ice (Preparation or manu					 presse	 h	119
pickled or preserve							37
The following premi						r •	
Sale of pre-wrapped				_	\cdots		6
Manufacture of pres						•••	1
During the year 1,36						ere fo	od is
prepared for sale or sold	. 165 n	otices	were	served	for the	e follo	wing
defects:—							J
Provide refuse recep	tacle			•••		• • •	8
Notice to wash hand	ds			•••		• • •	18
Use of tobacco			•	•••	• • •	• • •	$\frac{21}{76}$
Provide wash hand					• • •	• • •	$\begin{array}{c} 76 \\ 141 \end{array}$
Provide hot water s Provide cold water s					• • •		87
Cover surfaces	\dots			•••		• • •	247
Provide store-room							3
Provide sink			•				26
Provide improved v	entilatio	n	•		• • •	• • •	20
Provide locker accor	mmodati	on	•	• • •	• • •	• • •	39
Remove refuse			•	•••	• • •	• • •	19
Cease keeping anim				• • •	• • •	• • •	$\frac{18}{3}$
Cease using unsatisf Cease domestic was					• • •	• • •	3
Provide soap and to		_					$4\overline{5}$
Re-decorate walls, o				• • •			535
Repair walls, ceiling			•				99
Cleanse or repair eq			•	• • •	• • •	• • •	39
Cleanse walls, floors		ng		•••	•••	•••	502
Provide first aid equ			•	•••	• • •	•••	$\begin{array}{c} 12 \\ 22 \end{array}$
Remove unserviceal			20	• • •	• • •	• • •	3
Provide intervening Provide improved li			. C	• • •	• • •		8
Provide satisfactory			•				7
Provide suitable sto	_			• • •			35
Cleanse or rcpair sa				•••	• • •	• • •	32
Provide fuel store		• • • •			*	• • •	1
Protect from risk of	contam	ination			• • •	•••	15
Re-surface yard	• • •			• • •	•••	• • •	2
							2086

Food Hygiene Regulations, 1955.

Premises ins	pected	and	notices	served	:			
Grocery and Confectionery							99	
Fish frying			•••	• • •		• • •		37
Canteens	• • •	• • •	• • •	• • •		•••		49
Butchers	• • •		• • •	• • •	• • •		• • •	67
Dairies	• • •	• • •						5
Edible fats	• • •		• • •	• • •				12
Baking	• • •	• • •	• • •		• • •	• • •	• • •	13
Ice Cream		• • •	• • •	• • •	• • •	• • •	• • •	15
Cafes and Sr	ıack B	ars	• • •	• • •	• • •	• • •		12
Preparation		s	• • •	• • •	• • •	• • •	• • •	31
Licensed Pre	emises		• • •	• • •		• • •	• • •	99
Sweets, Cont			c.	• • •	• • •	• • •	• • •	30
Other Food	premis	ses	• • •		• • •	• • •		69
								638

Licensed Premises.

A survey of licensed premises in the Borough was carried out during the year. Inspections revealed, in varying degrees, the absence of proper sanitary accommodation, suitably accessible washing facilities for persons employed in the handling of food and drink, and in some cases, defective condition of the cellars.

A summary of the works required to be carried out are given below:—

Food Hygiene Regulations, 1955				
Cleanse walls, floors and ceilings			• • •	11
Repair walls, floors and ceilings, etc.	• • •		• • •	10
Provide store-room	• • •		•••	1
Provide sink				9
Provide wash-hand basin	• • •			43
Provide hot water			•••	79
Provide cold water	• • •			42
Cleanse or repair sanitary convenience			• • •	1
Provide intervening ventilated space	• • •		• • •	1
Insufficient ventilation	• • •			3
Re-decorate walls and ceilings	• • •			10
Provide satisfactory drainage				3
Public Health Act, 1936—Section 89				
Provide sanitary accommodation for m	12100			12
		• • •	• • •	
Provide sanitary accommodation for fe	maies	• • •	•••	10
Provide urinal accommodation	• • •	• • •	• • •	$\frac{2}{2}$
Replace unsatisfactory urinal accommo	odation			14
Unsatisfactory sanitary accommodation	n	• • •		9
Structural defects				17

Subsequent to the notifications of these defects to the respective Brewery Companies, discussions were held with representatives of the companies. These discussions were cordial and helpful and it was agreed that all the defects would be remedied as quickly as possible, priority to be given to necessary cleansing, and the provision of sinks and wash-hand basins with constant supplies of hot and cold water. In some cases, the provision of suitable sanitary accommodation necessitates major reconstruction of the premises, and due to various factors this must of course be carried out over a period of a year or so. The companies appear to be alive to the fact that the old types of external sanitary arrangements can no longer be tolerated, and it is predicted that improvements will be progressive. It is gratifying to note that plans have already been submitted for the provision of modern internal sanitary accommodation at three public houses to replace the existing external and unsatisfactory arrangements.

In conjunction with the Principal of the Ashlar-Spen Valley Institute of Further Education, a further course in Food Hygiene was held in the local Grammar School during the autumn term. The course extended over six evenings and consisted of lectures with films and filmstrips as illustrations. Two of the lectures were given by the Medical Officer of Health and four by one of the Public Health Inspectors. The average attendance was 21.

WATER SUPPLY. E.

The water supply in the area is satisfactory both in quantity and quality. Number of dwelling houses supplied direct from main **134**00 Number of population supplied direct from public water mains **36620** Number of dwelling houses supplied from public water mains by means of stand pipes Nil Number of population supplied from water mains by means Nil of stand pipes Water Sampling. Satisfactory Unsatisfactory Total 2 Chemical Bacteriological ... 1 14 15 Public Swimming Baths 3 3 SANITARY INSPECTION OF DISTRICT.

Dairies								2
Milk Distributors		• • •						1
T.B. Samples							• • •	2
Milk Samples		• • •						12
Water Samples								20
Food Samples				• • •		• • •		11
Ice Cream Sample								S
Ice Cream Shops		•••						15
Ice Cream Manufa								3
Food Preparing P								31
Bakehouses		,	• • •	• • •	• • •	• • •		13
Butchers Shops	•••	• • •	• • •	•••	• • •	• • •	• • •	67
	• • •	• • •	• • •	• • •	• • •	• • •		
Grocers Shops	• • •	• • •	• • •	• • •			• • •	99
Cafes and Restau	rants		• • •			• • •		12
Canteens						• • •	• • •	49
Fish Friers		• • •		• • •	• • •			37

Food Shops		• • •	• • •	• • •	• • •	361
Meat and Food Inspection	• • •	• • •	• • •	• • •	• • •	502
Food Premises re-inspection	n	• • •	• • •	• • •	• • •	70
Transport and Handling of		• • •				10
Public Houses	• • •	•••	•••	• • •	• • •	99
Miscellaneous to food prem		• • •		• • •	• • •	170
Housing Act	• • •	• • •	• • •	• • •		675
Housing Act Re-inspection		ellane	ous	• • •	• • •	524
Improvement Grants		• • •	• • •	• • •		42
Certificates of Disrepair	•••	• • •	•••			93
Overcrowding		• • •	•••	• • •		8
Demolition Sites	• • •	•••	• • •	• • •		125
Life of property	• • •	•••	•••	• • •	• • •	291
Prospective Council Tenant		• • •	• • •	• • •		12
Small Dwellings Acquisition		• • •	•••	• • •	•••	3
Land Charges Act	• • •	• • •	•••	•••	•••	250
Public Health Act	• • •	•••		•••	•••	2487
Public Health Act re-inspec			•••	•••	•••	540
Drainage	•••		•••	•••	•••	579
Stables and Piggeries	•••	•••	•••			14
Water Supply	•••	•••	•••	• • •	•••	55
Sanitary Accommodation	•••			•••		484
Atmospheric Pollution	• • •	•••	•••	•••	•••	409
Smoke Observations			•••	•••	•••	216
Boiler Plant Inspections	• • •	•••	•••	•••	• • •	72
Disinfection and Disinfestar	···	• • •	•••	• • •	• • •	14
Infectious Discoses		•••	•••	•••	•••	114
Refuse Collection and Salva	* * *	• • •	•••	•••	• • •	434
Controlled Tips		• • •	• • •	• • •	•••	169
Verminous and Unclean pre		• • •	• • •	•••	•••	
$\bigcap CC = 1$ $\bigcap CC = 1$		•••	•••	•••	• • •	48
TT ' 1	•••	• • •	• • •	•••	•••	$\frac{32}{2}$
	•••	• • •	• • •	• • •	•••	$\frac{2}{2c}$
Tents, Vans and Sheds	•••	•••	• • •	• • •	• • •	36
Fairground Market	•••	• • •	•••	• • •	• • •	53
TO 11' O	• • •	•••	• • •	•••	• • •	96
37 . 37 .	•••	• • •	• • •	•••	• • •	59
Noise Nuisances	• • •		• • •	• • •	• • •	19
Miscellaneous	• • •	•••	• • •	• • •	• • •	244
Interviews	• • •		• • •	• • •	• • •	781
Meetings		•••		•••	•••	50
Complaints			• • •	• • •	• • •	419
Prevention of Damage by P		•••	•••	• • •	•••	330
Prevention of Damage by P	ests Act—	_	pection	ns	• • •	699
Treatment of Sewer Manhol		• • •	•••	• • •	• • •	302
Factories Act		•••	•••	•••	• • •	11
Factories Act re-inspections		•••	•••	•••	• • •	6
Shops Act	•••	•••	• • •	•••	• • •	10
Shops Act—Re-inspections			•••	• • •	• • •	$\frac{2}{2}$
Pet Animals Act	· · ·		• • •	• • •	• • •	2
Rag Flock and Other Filling	Materials	•••	• • •	• • •	• • •	1
Fencing of Mines	•••	•••	• • •	•••		5

SUMMARY OF DEFECTS REMEDIED DURING 1958. HOUSING ACT, 1957 and PUBLIC HEALTH ACT, 1936.

W.C. apparatus repaired						4 77
	• • •	• • •	• • •	• • •	• • •	47
New dustbins provided	•••	• • •	• • •	• • •	• • •	219
Drains cleansed and repaired	1	• • •	• • •	• • •	• • •	40
Sink waste pipes	• • •	• • •	• • •	• • •	• • •	25
Soil and ventilating pipes	• • •	• • •	• • •	• • •	• • •	$\frac{2}{10}$
Rainwater pipes and gutters	• • •	•••	• • •	• • •	• • •	18
Roofs	• • •	• • •	• • •	• • •	• • •	25
Pointing of walls	• • •		• • •	• • •	• • •	9
Damp walls	• • •	• • •	• • •	• • •	• • •	14
Chimney stacks and pots	• • •	• • •	• • •	• • •	• • •	2
Windows and cords	• • •	• • •	• • •	• • •	• • •	16
Wall plaster	• • •	• • •	• • •	• • •	• • •	19
Ceilings	• • •	• • •		• • •	• • •	14
Ranges, flues and fireplaces	• • •	• • •	• • •	• • •	• • •	11
Doors, floors and stairs	• • •	• • •	• • •	• • •		16
Water service pipes	• • •		• • •			18
Offensive accumulations rem	noved	• • •	• • •	• • •	• • •	6
Noise Nuisance	• • •		• • •	• • •		3
Effluvia Nuisance	• • •	• • •	• • •			4
Dangerous structures			• • •			9
Sanitary accommodation—li		oremise			• • •	47
g a a	,	`				
						564
	T' O TTOY	~ ~ ~				
	Housi	NG.				
Number of New Houses erec			ear.			
	ted durir	ng the y		lor (b)		279
(a) Total, including number	ted durings	n g the y separat	ely und	ler (b)	•••	272
	ted durings given ority I	ng the y separat . Perma	ely unc anent	•••		196
(a) Total, including number	ted durings given ority I	n g the y separat	ely unc anent	•••		
(a) Total, including number 1. By the Local Author	ted durings given ority I	ng the y separat . Perma . Temp	ely unc anent orary	• • •	•••	196 Nil
(a) Total, including number1. By the Local Author2. By other Local Aut	ted durings given ority II horities	ng the y separat . Perma . Temp	ely unc anent orary 	•••	•••	196 Nil Nil
 (a) Total, including number 1. By the Local Author 2. By other Local Author 3. By other bodies or property 	ted during size size size size size size size size	separat Perma Temp	ely uncanent orary 	•••	•••	196 Nil
 (a) Total, including number 1. By the Local Author 2. By other Local Author 3. By other bodies or property (b) With State assistance up 	ted during respectively. In the second respectively. The second respect	separat Perma Temp Housin	ely uncanent orary ng Acts		•••	196 Nil Nil 76
 (a) Total, including number 1. By the Local Author 2. By other Local Author 3. By other bodies or property (b) With State assistance up to the Local Author 1. By the Local Author 	ted during serving ser	separat Perma Temp Housin	ely uncanent corary ng Acts		•••	196 Nil Nil 76
 (a) Total, including number 1. By the Local Author 2. By other Local Author 3. By other bodies or property (b) With State assistance up 	ted during a given ority I II horities persons ander the ority	separat Perma Temp Housin	ely uncanent orary ng Acts		•••	196 Nil Nil 76
 (a) Total, including number 1. By the Local Author 2. By other Local Author 3. By other bodies or property (b) With State assistance up to the Local Author 2. By other bodies or property 	ted during a given ority I II horities persons ander the ority persons	separat Perma Temp Housin	ely uncanent orary ng Acts		•••	196 Nil Nil 76
 (a) Total, including number 1. By the Local Author 2. By other Local Author 3. By other bodies or property (b) With State assistance up to the Local Author 1. By the Local Author 	ted during a given ority I II horities persons ander the ority persons	separat Perma Temp Housin	ely uncanent orary ng Acts		•••	196 Nil Nil 76
 (a) Total, including number 1. By the Local Author 2. By other Local Author 3. By other bodies or production (b) With State assistance upon the Local Author 2. By other bodies or production 1. Inspection of Dwellingh 	ted during a given ority I II horities persons ander the ority persons ouses du	separat Perma Temp Housin	ely uncanent orary ng Acts ne year		•••	196 Nil Nil 76
 (a) Total, including number 1. By the Local Author 2. By other Local Author 3. By other bodies or process. (b) With State assistance upon the Local Author 2. By other bodies or process. 1. Inspection of Dwellingh (1) (a) Total number of 	ted during a given ority I II horities persons ander the ority persons ouses during the ority persons	separat Perma Temp Housin	ely unconent orary ng Acts ne year ses ins	spected	 for	196 Nil Nil 76
 (a) Total, including number 1. By the Local Author 2. By other Local Author 3. By other bodies or production (b) With State assistance under the Local Author 2. By other bodies or production 1. Inspection of Dwellingh (1) (a) Total number of housing defects 	ted during a given ority I II horities persons ander the ority persons ouses during the following th	separat Perma Temp Housin uring the y	ely unconent orary ng Acts ne year. ses ins Health	or Hou	for	196 Nil Nil 76
 (a) Total, including number 1. By the Local Author 2. By other Local Author 3. By other bodies or production (b) With State assistance upon the Local Author 2. By other bodies or production 1. Inspection of Dwellingh (1) (a) Total number of housing defects Acts) 	ted during a given ority I II horities persons ander the ority persons ouses during the following th	separat Perma Temp Housin uring the	ely unce anent orary ng Acts ne years ses ins Health 	spected or Hou	for	196 Nil Nil 76 196 Nil
 (a) Total, including number 1. By the Local Author 2. By other Local Author 3. By other bodies or production (b) With State assistance under the Local Author 2. By other bodies or production (1) (a) Total number of housing defects Acts) (b) Number of inspection 	ted during a given ority I II horities persons ander the ority persons ouses during the following formula and the control of t	separat Perma Temp Housin uring the	ely unconent orary ng Acts ne year ses ins Health or the	spected or Hou	for sing	196 Nil Nil 76 196 Nil
 (a) Total, including number 1. By the Local Authors 2. By other Local Authors 3. By other bodies or production (b) With State assistance under the Local Authors 2. By other bodies or production (a) Total number of housing defects Acts (b) Number of inspection (c) (a) Number of dwelling 	ted during a given ority I II horities persons ander the ority persons ouses during the following funder the f	separat Perma Temp Housin uring the y	ely unconent or anent or anent or the cluded	spected or Hou	for sing sub-	196 Nil Nil 76 196 Nil
 (a) Total, including number 1. By the Local Authors. 2. By other Local Authors. 3. By other bodies or 1. (b) With State assistance upon the Local Authors. 2. By other bodies or 1. 1. Inspection of Dwellingholds (1) (a) Total number of housing defects. Acts) (b) Number of inspection of dwellingholds. (c) (a) Number of dwellingholds. 	ted during a given ority I II horities persons ander the ority persons ouses during the following th	separat Perma Temp Housin uring the year and the ses (incoming the ses (inco	ely und anent orary ng Acts ses ins Health or the cluded ere inc	purpos under	for sing sub-and	196 Nil Nil 76 196 Nil
 (a) Total, including number 1. By the Local Authors. 2. By other Local Authors. 3. By other bodies or 1. (b) With State assistance upon the Local Authors. 2. By other bodies or 1. 1. Inspection of Dwellingh (1) (a) Total number of housing defects. Acts) (b) Number of inspection (2) (a) Number of dwellingh (1) about the condend (1) about the condend	ted during a given ority I II horities persons onder the ority persons ouses during the cetions of dwells (under ections of the Hority ove) where the Hority over the Hority of the Hority	separat Perma Temp Housin uring the y separat the	ely und anent orary ng Acts ne year ses ins Health or the cluded ere inc consolid	pected or Hou purpos under cluded lated R	for sing sub-and	196 Nil Nil 76 196 Nil 565 1055
 (a) Total, including number 1. By the Local Authors. 2. By other Local Authors. 3. By other bodies or 1. (b) With State assistance upon the Local Authors. 2. By other bodies or 1. 1. Inspection of Dwellingholds (1) (a) Total number of housing defects. Acts) (b) Number of inspection of dwellingholds. (c) (a) Number of dwellingholds. 	ted during as given ority I II III horities persons ander the ority persons ouses during a (under cections and linghous ove) when the Horities and 1932	separate. Permale. Tempers Housing the ses (including Control of Control	ely unconent orary ng Acts ne year ses ins Health or the cluded ere inconsolid	spected or Hou or Hou purpos under luded lated R	for sing sub-and tegu	196 Nil Nil 76 196 Nil

(3)	Number of dwellinghouses found to be in a state sedangerous or injurious to health as to be unfit fo human habitation	o r . 273
(4)	Number of dwellinghouses (exclusive of those referred	đ
	to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	
2. R	demedy of Defects during the year without Service of ices.	f Forma
	Number of defective dwellinghouses rendered fit in consequence of informal action by the Local Authority or their Officers	7
		. 194
	ction under Statutory Powers during the year.	
$\begin{array}{c} (A) P \\ (1) \end{array}$	Number of dwellinghouses in respect of which notices	3
(2)	were served requiring repairs	. 6
	(a) By Owners	
	(b) By Local Authority in default of owners	. Nil
(B) P	roceedings under Public Health Acts.	
(1)	Number of dwellinghouses in respect of which notices	3
(2)	were served requiring defects to be remedied Number of dwellinghouses in which defects were	. 4
, ,	remedied after service of formal notices:—	
	(a) by owners (b) By Local Authority in default of owners	. 4 Nil
(C) P	roceedings under Sections 16 and 17 of Housing Act, 195	7.
(1)	Number of dwellinghouses in respect of which Demolition Orders were made	-
(2)	Number of Local Authority owned houses certified	. 30
(3)	unfit by Medical Officer	
(4)	Demolition Orders	ı
(5)	Undertakings to render fit for habitation (Section 16(4))	. $4 \\ 2$
(6)	Closing Orders (Section 17(1))	
(D) P	roceedings under Section 18 of the Housing Act, 1957.	
	Number of separate tenements or underground rooms	S
	in respect of which Closing Orders were made Number of separate tenements or underground rooms	T
	in respect of which Closing Orders were determined the tenement or room having been rendered fit	,
(E) 7		Nil
	Proceedings under Section 42 of the Housing Act, 1947.	
(1)	8 Clearance Orders. Number of houses	. 98

4. Housing Act, 1957. Part IV. Overcrowding.

(a)	(1)	Number of dwellinghouses overcrowded at the end	
		of the year	15
	(2)	Number of families living therein	15
		Number of persons dwelling therein	84
(b)	(1)	Number of new cases of overcrowding reported	
		during the year	7
(c)	(1)	Number of cases of overcrowding relieved during	
		the year	13
	(2)	Number of persons concerned in such cases	60

From the following table it will be seen that the Housing Committee dealt with 149 houses under the Clearance, Closure and Demolition Sections of the Housing Act, 1957.

Houses Dealt with during the year.

110 4303 1300	The wrest during the year.		No. of
Ward Spen & Littletown.	Address 20, 22 Gomersal Lane 1, 2, 3 Stanley Pit Cottages	Action Taken Demolition Orders Demolition Orders	houses 2 3
Roberttown.	Lumb Lane, Roberttown No. 3	Clearance Order	7
	Commonside, Roberttown No. 4	Clearance Order	10
	4, 6 Echo Street, Roberttown	Demolition Orders	2
	158 Roberttown Lane	Undertaking not to re-let	1
NT	60, 62 Commonside, Roberttown	Demolition Order	2
Norristhorpe	Norristhorpe Lane No. 1 Area	Clearance Order	37
	2, 3 Norris Hill, Norristhorpe	Undertaking not to re-let	$\frac{2}{5}$
Millbridge	Balmfields, Norristhorpe	Clearance Order	
Millbridge	8 Chapel Street, Flush	Demolition Order	1
	4, 6 Leeds Road, Liversedge	Demolition Orders (Local Authority owned)	
		(Local Authority owned houses certified unfit by	
		M.O.H.)	
	15, 17, 19, 21 Holme Street,	Demolition Orders	4
	Liversedge	Demontion Orders	
	2 Wormald Street, Liversedge	Closing Order	1
	11 Well Street, Flush	Closing Order	1
	10 Chapel Street, Flush	Closing Order	1
Hightown.	Halifax Road, Hightown No. 2	Clearance Order	13
	Roundwell Road, Hightown No. 3	Clearance Order	13
	22 Roundwell Road, Hightown	Demolition Order	1
	32, 34, 36 Roundwell Road	Closing Orders	3
	125 Windy Bank Lane, Hightown	Closing Orders	1
	246 Halifax Road, Hightown	Closing Orders	1
	768 Halifax Road, Hightown	Closing Order	l 1
Howtobood	40 Clough Lane, Hightown	Closing Order	l 1
Hartshead. Cleckheaton	88 Prospect Road, Hartshead	Closing Order	1
West.	4 Westgate, Cleckheaton	Closing Order	1
West.		(Local Authority owned house certified unfit by	
		M.O.H.)	
	23 Quarry Road, Cleckheaton	Closing Order	1
	18 Moorbottom, Cleckheaton	Undertaking not to re-let	î
Cleckheaton	Church Street, Cleckheaton No. 2	Clearance Order	6
East.	6 St. Peg Lane, Cleckheaton	Demolition Order	1
Birkenshaw.	64, 66, 68, 70, 72, 74 Birkenshaw	Demolition Orders	6
	Lane, Birkenshaw		
	Chellow House, The Bottoms,	Demolition Order	1
	Birkenshaw		
Gomersal.	96, 98, 100 Upper Lane, Gomersal	Demolition Orders	3
	131, 133 Dewsbury Rd., Gomersal		2
	17, 19, 21 Bleak Street, Gomersal	Demolition Orders	3
	184 Lower Lane, Little Gomersal	Demolition Orders	İ
	Dewsbury Road, Gomersal	Clearance Order	1
			149
			170

RENT ACT.

Ap _]	plications for Certificates of Disrepair.			
(1)	Number of applications for certificate			44
(2)	Number of decisions not to issue certificates			Nil
(3)	Number of decisions to issue certificates	• • •		47
	(a) in respect of some but not all defects	• • •	• • •	27
(4)	(b) in respect of all defects		•••	20
(4)	Number of undertakings given by landlord up graph 5 of the First Schedule		•	40
(5)		···	undor	49
(0)	proviso to paragraph 5 of the First Schedule		under	Nil
(6)			• • •	35
Anr				
whi	plications for Cancellation of Certificates.			
(7)		y for	can-	
(0)	cellation of certificates	• • •	• • •	6
(8)	Objections by tenants to cancellation of certific	cates	• • •	Nil
(9)	j = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 =	of ter	nants'	
(7.0)	objection			NiI
(10)	Certificates cancelled by Local Authority			5

CONVERSION OF PRIVY MIDDENS.

During the year the Health Committee continued the scheme of grant aid to persons desiring to convert privy middens to water closets. The following table shows the grants sanctioned during the year:—

	Total		No. of	
Applications	Estimated	Council's	Privy	No. of
granted	Cost	Grant	Middens	W.C's.
	£ s. d.	£ s. d.		
28	1,695 15 6	798 4 11	40	40
Since the	beginning of the	scheme the figu	ires are as	follows :
	Total		No. of	
Applications	Estimated	Council's	Privy	No. of
granted	Cost	Grant	Middens	W.C's.
	£ s. d.	£ s. d.		
186	11,938 8 8	4,500 0 7	309	314

Hartshead Village.

Following the provision by the Council of a foul water sewer to serve a large part of the village, representations were made to the owners of properties concerned, to convert the convertible privy middens to water closets with the help of the Council's grant scheme. By the end of the year, the Committee approved grants-in-aid for the conversion to water closets of 98% of the privies which were found practical to convert. The works of conversion are proceeding satisfactorily.

In the near future, the only privies remaining in the village will be those serving houses which are scheduled for slum clearance, and at the isolated properties which are not served by a sewer. As regards the latter, it is anticipated that small individual sewage disposal plants may be installed within a reasonable period of time.

CONVERSION OF WASTE WATER CLOSETS.

During the year the Health Committee continued the scheme of grant aid to persons desiring to convert waste water closets to water closets. The following table shows the grants sanctioned during the year:—

	Total		No. of	
Applications	Estimated	Council's	Waste	No. of
granted	Cost	Grant	Water	W.C's.
	f. s. d.	f. s. d.	Closets	
27	$1.36\tilde{2}$ 4 11	$65\widetilde{1}$ 0 4	31	31

Since the beginning of the scheme the figures are as follows:—

	Total		No. of	
Applications	Estimated	Council's	Waste	No. of
granted	Cost	Grant	Water	W.C's.
	f_{i} s. d.	f. s. d.	Closets	
75	$3,6\widetilde{0}3$ 9 3	$1,6\tilde{4}3$ 13 5	91	91

REFUSE COLLECTION, REFUSE DISPOSAL AND SALVAGE.

A. Refuse Collection.

The collection service functioned well during the year and an efficient service was maintained. The Department was responsible for the removal of refuse from 14,362 premises, and the total weight of 10,897 tons of refuse was removed.

In the first three months of the year the refuse collection service fell below its usual standard, due to snow and an exceptionally high rate of sickness amongst the workmen. When normal conditions prevailed, detailed inspections were made into the sizes of the various rounds and the loading rate of collection teams. Minor alterations to rounds were made and thereafter the service was mainly satisfactory.

B. Refuse Disposal.

Disposal of refuse by controlled tipping continued at the Football Field, East Bierley, and The Bottoms, Heckmondwike.

During the year a Fordson Major diesel engined tractor was purchased for use on the tips.

C. Public Cleansing Costing Return.

COST STATEMENT 1958/59.

Item	Particulars 1.	Collection 2.	Disposal 3.	Totals 4.
1.	REVENUE ACCOUNT Gross Expenditure:	£	£	£
	(i) Labour (ii) Transport (iii) Plant, equipment, land	13089 7845	1508 700	$14597 \\ 8545$
	and buildings (iv) Other items	255 —	226	481
	(v) Total gross expenditure	21189	2434	23623
2.	Gross Income	159	2689	2848
3.	Net Cost	21030	Cr. 255	20775
4.	Capital expenditure met from revenue (included above)	_		
5. 6.	Unit Costs. Gross cost per ton, labour only Gross cost per ton, transport	s. <u>1</u> . 24 0	s. d. 2 9	s. d. 26 9
7.	only Net cost (all expenditure) per ton	14 5 38 11	$egin{array}{cccccccccccccccccccccccccccccccccccc$	15 8 43 4
8. 9.	Net cost per 1,000 population Net cost per 1,000 premises	£ 574 1464	Cr. £ 7 18	£ 567 1446

Salvage and Trade Refuse. Analysis of income and tonnage.

Salvage:				Income (Included in Item 2)	Tonnage Collected Tons
(a) Kitchen Wast	e		• • •		****
(b) Scrap Metal	•••	• • •		36	4/10ths
(c) Waste Paper	•••		• • •	2574	201
(d) Other Salvage		• • •	•••		
				2610 ===	201 2/5ths
Trade Refuse	•••	• • •	*	236	340

VERMINOUS PREMISES.

During the year 15 private houses were found to be infested with vermin. Advice and assistance was given to the tenants.

5 Council houses were found to be infested with bed bugs. 2 were fumigated by H.C.N. gas and 3 were disinfested by other methods.

The furnishings of 3 prospective Council house tenants were treated by H.C.N. Gas on removal to Council houses.

RODENT CONTROL.

During the year 1029 visits were made with the following results:

1.	No. of properties inspected	•••	287
2.	No. of rat infestations found No. of mice infestations found Total number of infestations	•••	$114 \\ 122 \\ 236$
3.	No. of properties treated by Local Authority		236
4.	No. of notices served to carry out treatment	•••	Nil
5 .	No. of notices served for structural alteration	•••	Nil

OFFENSIVE TRADES.

There are four offensive trades registered in the district.

Two Soap Boilers.
Two Fat Melters and Fat Extractors.

30 inspections were made. Notice was served to remedy the following nuisances:—

Obnoxious odours	 	• • •	 5
Fly nuisance	 		 4
Unclean premises	 		 1

ATMOSPHERIC POLLUTION.

216 smoke observations of durations varying from 30 minutes to 2 hours were taken during the year and of these 43 were unsatisfactory. In order to assess whether these unsatisfactory chimneys were likely to be able to comply with the Dark Smoke (Permitted Periods) Regulations, a series of observations were taken which covered early morning, normal day time and evening hours, and following the information obtained 17 informal notices were served. 72 boiler plant inspections were carried out in connection with the unsatisfactory smoke emissions.

An undoubted improvement has been achieved in the Westgate area regarding the emissions of smoke and obnoxious gases amenating from a chemical works. This improvement is due to two factors: (a) the replacement of two underloaded Lancashire boilers, one of which was hand fired with coal and the other with a mixture of creosote pitch, by a vertical smoke tube boiler complete with automatic underfeed stoker, and (b) the closing down of a rotary kiln and auxiliary plant for the manufacture of sodium sulphide.

A short time prior to the Clean Air Act and The Dark Smoke (Permitted Periods) Regulations becoming fully operative in June of this year, a letter was sent to the occupiers of the premises within the Borough affected by this legislation, giving a summary of the Regulations, and requesting their co-operation in achieving the object of the enactments, *i.e.*, a substantial reduction in the pollution of the atmosphere by smoke, grit, etc. Following discussions with managements, it is felt that a large measure of mutual co-operation will be forthcoming between the Council and industry and so limiting the number of cases which would require recourse to statutory proceedings.

Five notifications were received under the provisions of Section 3(3), Clean Air Act, of the intention to install new furnaces. No application was made for the "prior approval" of any of these furnaces.

At the end of the year the Committee decided that it would be necessary to replace the existing hand fired vertical cross tube boiler at the Public Abattoir by the provision of a Mark R.O.30 Clayton Steam Generator fired by fuel oil. When installed this should be smokeless in operation and will achieve a higher thermal efficiency than the existing plant.

In the early part of the year the colliery spoilbank at Birkenshaw gave cause for complaint due to serious nuisance from smell whilst the tip was on fire. Following representations to the National Coal Board, continuous water spraying was put into operation followed by the covering of the exposed surfaces with red shale. The fire was brought well under control and no nuisance is now being caused.

In collaboration with the Medical Officer of Health a joint report was submitted to the December meeting of the Health Committee setting out the general and local considerations to be taken into account in deciding upon a programme for instituting Smoke Control Areas throughout the Borough. It was resolved that the Council declare their intention to complete the creation of Smoke Control Areas for the Borough within a maximum period of twenty years, subject to annual review. It was further resolved that a sub-committee of the Health Committee be appointed to meet the Housing Committee's representatives, with a view to a Housing Estate being included in the first Smoke Control Area to come into force, if at all possible, in the summer of 1960.

The following works were carried out to remedy smoke emissions:—

Conversion from hand to mechanic	cal firi	ng	• • •	•••	5
Provision of mechanical draught .	• • •	•••	• • •	•••	5
Provision of smoke alarm indicato	r	• • •	• • •	•••	2
Shortening of fire grate	• • •		• • •	•••	2
Conversion of annealing furnace fr	om co	al to co	oke	• • •	2
Replacement of coal with smokeles	ss fuel		•••	•••	4
Improved hand firing technique .	• • •	• • •	• • •	• • •	4
Flue cleaning	• • •	• • •	•••	• • •	2
Overhaul of mechanical stokers .	• • •	• • •	• • •	•••	2

The instruments for the measurement of atmospheric pollution throughout the area are sited as follows:—

Site. Apparatus.

Marsh Depot, Rawfolds, Cleckheaton 1 Deposit Gauge and 1 Lead Peroxide instrument.

Elm Bank, Cleckheaton ... 1 Automatic Smoke Filter.

North Bierley Hospital, Cleckheaton 1 Deposit Gauge—1 Lead Peroxide instrument.

The following table shows the deposit throughout the area for each month of the year:—

	BAR, JONAPACS	Total solids per square mile in tons									
		Marsh Depot	North Bierley	High Rising	Millbridge School	Tennis Club					
January February March April May June July August September October November		$ \begin{array}{c} 15.80 \\ 15.36 \\ 15.03 \\ 10.58 \\ 20.25 \\ 17.15 \\ 18.02 \\ 11.15 \\ 14.49 \\ 9.37 \\ 7.04 \end{array} $	$ \begin{array}{c} 12 \cdot 42 \\ 10 \cdot 64 \\ 9 \cdot 16 \\ 4 \cdot 97 \\ 23 \cdot 81 \\ 12 \cdot 08 \\ 12 \cdot 12 \\ 10 \cdot 37 \\ 11 \cdot 17 \\ 6 \cdot 62 \\ 6 \cdot 65 \end{array} $	$ \begin{array}{c} 12 \cdot 41 \\ 15 \cdot 48 \\ 9 \cdot 85 \\ 6 \cdot 69 \\ 11 \cdot 33 \\ 13 \cdot 86 \\ 9 \cdot 87 \\ 11 \cdot 20 \\ 11 \cdot 49 \\ 4 \cdot 61 \\ 5 \cdot 30 \end{array} $	16.57 13.21 No result due to damage to gauge 23.37 19.20 17.62 14.34 14.82 9.48	11.67 12.02 9.58 8.17 11.76 12.42 No result 13.27 12.20 5.79 7.64					
December Average	•••	$\frac{16 \cdot 85}{14 \cdot 26}$	11.16	$\begin{array}{ c c c }\hline 12.15\\\hline 10.35\\\hline \end{array}$	11·56 15·57	$\frac{15 \cdot 77}{10 \cdot 94}$					

The following table shows the sulphur dioxide throughout the area for each month of the year :—

			Milligrams of SO.3 per day per 100 sq. cm. of lead peroxide								
			Marsh Depot	North Bierley	High Rising	Millbridge School	Tennis Club				
January			$2 \cdot 75$	$2 \cdot 75$	$2 \cdot 64$	3.10	$2 \cdot 80$				
February			$1 \cdot 96$	$2 \cdot 02$	$2 \cdot 12$	$2 \cdot 43$	$1 \cdot 65$				
March			$2 \cdot 35$	$1 \cdot 66$	$1 \cdot 23$	1.57	1.68				
April			$1 \cdot 82$	$1 \cdot 16$	$1\cdot 24$	1.48	$1 \cdot 14$				
May	• • •	• • •	$1 \cdot 70$	$1\cdot 22$	$1 \cdot 18$	$1 \cdot 29$	$1 \cdot \overline{13}$				
June			$1 \cdot 19$	$0 \cdot 70$	$0 \cdot 65$	0.77	$0 \cdot 73$				
July	• • •		$1 \cdot 17$	$0 \cdot 67$	$0 \cdot 72$	0.87	$0 \cdot 94$				
August	• • •	••• [$1 \cdot 00$	$0 \cdot 69$	$0 \cdot 71$	0.66	0.85				
September	• • •		0.48	$0 \cdot 94$	$0 \cdot 91$	0.68	$1 \cdot 02$				
October	• • •	• • •	0.66	$0 \cdot 91$	$0 \cdot 76$	0.40	$1 \cdot 14$				
November			$1 \cdot 64$	$1 \cdot 59$	$0 \cdot 90$	$2 \cdot 37$	$2 \cdot 25$				
December	•••	•••	$3 \cdot 06$	2.88	$2 \cdot 53$	$2 \cdot 60$	$2 \cdot 32$				
Average	•••	•••	1.65	1.43	1.30	1 · 52	1 · 47				

The following table shows the concentration of smoke in the air at Elm Bank, Cleckheaton:—

Concentration of smoke in the air in milligrams per 100 cubic meters									
	Monthly Average	Highest Daily Average		Monthly Average	Highest Daily Average				
January February March April May June	35 21 19 16 14 11	74 38 39 30 36 27	July August September October November December	12 15 24 40	20 20 39 68 97 72				

SHOPS ACT.

No. of shops	v 6 m	•••		• • •		* * *	• • •	445
Food Shops	•••	• • •	• • •	•••	• • •	• • •		317
Other Shops	•••	• • •	• • •	• • •	• • •	u • •		128

24 inspections were made during the year and the following contraventions dealt with:—

Miscellaneo	us .		• • •				 	6
Closing hou	rs.						 	2
Health .								4
Statutory F	forms n	ot	displayed	• • •	• • •	* • •	 * * *	$\overline{2}$

PUBLIC CONVENIENCES.

The accommodation below is provided in 17 conveniences throughout the area:—

Females.

Males.

32 water closets.

21 water closets and urinal accommodation.

One workman is engaged full-time in cleaning these conveniences. The buildings are in the main, modern structures designed specifically for the purpose.

STAFF.

There were no staff changes during the year and it was possible to make further steady progress. I would like to thank the members of my Department for their unremitting efforts in a wide sphere of activities and for their loyal co-operation at all times.

APPENDICES.

- A. Vital Statistics of the Borough of Spenborough for 1949-1958.
- B. Infantile and Maternal Mortality Rates and Stillbirth Rates of Spenborough for the past twenty years.
- C. Notifications of Infectious Disease in the Borough of Spenborough 1935-1958.
- Adoptive Acts in force in the District.

 Byelaws in force in the District.
- E. Clinic and Treatment Centres.
- **F.** Health Talks at Secondary Schools.
- G. Staff of the Health Department.

VITAL STATISTICS OF THE BOROUGH OF SPENBOROUGH FOR 1949-58.

	1		ı		1										
	16	ages		Rate	19.6	14.1	14.6	14.2			13.7	13.1	12.8	13.2	
	onging to th	At all ages		Number	002	524	537	524	491	508	503	481	469	484	
	Net Deaths belonging to the District er I year At all a	Deaths bel	Under 1 year	Rate per	births	42.0	25.8	31.8	27.2	25.6	38.1	19.2	17.6	28.4	21.9
	Ne	Under		Number	9. 7.0	4.	16	15	13	17	10	6	14	12	
	Trans-	ferable Deaths of non- residents registered in the District			17.9	139	139	155	109	153	155	126	168	177	
	Trans-	Trans- ferable Deaths of residents not registered in the District			Ξ	22	27	88	12		∞	9	4	2	
		Sathe	Fotal Deaths registered in the District nber				11.5		10.7	10.0	6.7	8.6	တ	9.8	
		Total I	registered in the District	Number	898	407	425	397	394	366	356	361	305	314	
	hs Rate		7.0	14.7	13.6	14.8	13.8	•	14.2		13.5	15.0			
	Births			670	543	503	551	202	446	521	512	493	548		
	Ponii-	lation	to middle	36760	37030	36840	36860	36760	36760	36680	36690	36560	36620		
				Year	1040	1950	1921	1952	1953	1954	1955	1956	1957	1958	

8253	36981		13402
:	:	•	•
:	•	:	:
(Ie	:	l. 1958	:
i Wat		ıl (Mid	:
Inlanc	1951)	Genera	:
Area of District in Acres (Land and Inland Water)	Total Population at all ages (Census 1951)	Estimated Population by Registrar	Number of Inhabited Houses

APPENDIX B.

INFANT AND MATERNAL MORTALITY RATES AND STILLBIRTH

RATES OF SPENBOROUGH FOR THE PAST TWENTY YEARS.

		Infa	ants	Mot	hers	Stillbirths		
Year	Births	Deaths	Rate	Deaths	Rate	Number	Rate	
1939	484	18	37	Nil		19	38 · 1	
1940	495	20	40.4	5	9.6	25	48.1	
1941	496	19	38.3	2	3 · 8	18	$35 \cdot 0$	
1942	503	27	53.7	Nil		15	28.9	
1943	472	16	33 · 9	2	4.0	22	$44 \cdot 5$	
1944	585	28	47.9	Nil		11	18.4	
1945	471	22	46.7	1	$2 \cdot 1$	14	28.0	
1946	646	35	$54 \cdot 2$	Nil		15	$22 \cdot 7$	
1947	756	23	30 · 4	Nil	nya sanasan	26	$33 \cdot 2$	
1948	646	27	40.5	1	1.5	19	$28 \cdot 6$	
1949	579	25	43 · 0	Nil	not the same	15	$25 \cdot 2$	
1950	543	14	$25 \cdot 8$	1	1.8	20	$35 \cdot 5$	
1951	503	16	31.8	Nil		15	29.0	
1952	551	15	$27 \cdot 2$	Nil		9	16 · 1	
1953	507	13	25.6	Nil		11	21.2	
1954	446	17	38.1	1	2.2	12	$26 \cdot 2$	
1955	521	10	19.2	1	1.9	11	20.7	
1956	512	9	17 · 6	Nil		14	26.6	
1957	493	14	28 · 4	Nil	_	12	23.8	
1958	54 8	12	21 · 9	Nil		14	24.9	

NOTIFICATIONS OF INFECTIOUS DISEASE in the Borough of Spenborough, 1935-1958.

Totals	340 340 341 563 1273 882 1026 1026 1026 1026 1026 1026 1026 102
Other Diseases	0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Whooping Cough	272 272 293 272 272 273 273 273 273 273 273 273 27
Measles	911 988 987 1953 1953 1968 1968 197 197 198 198 198 198 198 198 198 198 198 198
Other Tuberculosis	14714004ff00007544 24714004ff0000754
Respiratory Tuberculosis	00000000000000000000000000000000000000
Сһіскеп Рох	83 108 108 100 100 100 100 100 100 100 100
Ophthalmia Neonatorum	6 188864444 818 4
Puerperal Pyrexia	-4
Puerperal Fever	- C7
Malaria	
Erysiplelas	88251806218014048911770346
Cerebro-Spinal Fever	- Q Q
Pneumonia	22 42 43 43 40 40 40 40 40 40 40 40 40 40 40 40 40
Diphtheria	1114248844888 11114718873888 1040
Scarlet Fever	119 655 117 117 688 688 687 688 688 687 688 688 688 68
Enteric Fever	₩ ₩
Poliomyelitis and Polioencephalitis	o 54005 1640
Smallpox	
Year	1935 1935 1937 1938 1940 1940 1947 1950 1950 1955 1955 1955

ADOPTIVE ACTS IN FORCE IN THE BOROUGH.

The Public Health Acts Amendment Act, 1907. (Sections 15-22, 28-33, 86, 95, and Part VI).

The Public Health Acts Amendment Act, 1890.

(Sections 34, 35, 37, 38, 40, 42, 43, 44, 45 and 46).

The Private Street Works Act, 1892.

The Public Libraries Act, 1892.

The Public Health Act, 1925 (Part II except Sections 15 and 20).

West Riding County Council (General Powers) Act, 1951.

(Part IV—Section 36, Part V, Part VI, Part VII, Part VIII—Sections 75 and 76, Part XI, Part XII, Part XIV—Section 120).

BYELAWS IN FORCE IN THE BOROUGH.

Subject.

Date of Confirmation.

26th November 1928

A. Made by the Borough Council.

In operation within the wh	hole of the	e Borou	igh:	
Building Byelaws	•••		•••	11th June 1953
Hackney Carriages	•••	•••	•••	17th February 1948
, , ,			(varied—7th Dec. 1951
			`	and 1st April, 1957)
Handling, Wrapping				24th March 1950
The Prevention of '				
sumption, Misuse		ninatio	on of	
Water*		•••	• • •	20th March 1952
Hairdressers and Bar	bers	•••		1st May, 1953
Good Rule and Governme	nt			1st February, 1957
Motor Vehicles let fo		•••	• • •	24th December, 1956
Public Slaughterhous				16th August, 1956
				10th Hugast, 1990
In operation within the	Borough	exclu	ding	
Birkenshaw, Hunswor		parts	of	
Hartshead and Clifton	:			
New Streets	• • •	• • •		15th March 1927
Wireless Apparatus	•••	• • •	• • •	15th May 1930

B. Made by the West Riding County Council.

- 1. Street Collections.
- 2. Byelaws made under the Highways and Locomotives (Amendment) Act, 1878.

*Operative only in the Corporation's water supply area.

- 3. Sale of Coal and Coke and Solid Fuels.
- 4. Regulations relating to the control of dogs.
- 5. Regulations relating to Stage Plays.
- 6. Employment of Children.

Smoke Abatement

7. Personal Weighing Machines.

CLINIC AND TREATMENT CENTRES.

When Open.	Tuesdays 2—4 p.m Tuesdays 2—4 p.m.		2nd and 4th Thursday in the month.	3rd Inursday in the month.	Fridays (fortnightly) 2—4 p.m.		Mondays 2—4 p.m.	Thursdays 2—4 p.m.	Tuesdays 9.30 a.m.—12 noon	Fridays 3-4 p.m.	Mondays 9.30 a.m.—11.30 a.m.	Thursdays (2nd & 4th) 9 a.m12 noon	Mondays 1-30 p.m.	Tuesdays 1-30 p.m.	Thursdays 10 a.m.—12 noon and	1 p.m.—5 p.m.	Mondays 1—4 p.m.	Thursdays 9 a.m.—12 noon	Tuesdays 9 a.m.—5 p.m.	Fridays 9 a.m.—12 noon and	2 p.m.—4 p.m.	Daily by appointment	Wednesdays (fortnightly) 7.30 p.m.	Tuesday 9.30 a.m.—4 p.m.	Wednesdays 1-30 p.m.—4 p.m.	Thursdays (fortnightly) 1-30—4 p.m.	Thursdays (fortnightly) 1-30—4 p.m.		Mondays 7.0 p.m. (closed during Aug.)
	 aw	:	: "	edge	:		:	:		:	:	:	:	:	:			:	:		:			:	:	:	:		:
Situation.	rensha	٠	:	"Ivers	٠			:								•					•								:
	Valley Road, Littletown, Liversedge Old Lane Methodist Sunday School, Birkenshaw		aton .	own, 1	:		əş	:			•	:	:	:	se		3e	:	:	:		•	:	:	ge	:	:		• • • • • • • • • • • • • • • • • • •
		Elm Bank, Cleckheaton	Temperance Hall, Scholes, Cleckheaton	Methodist Sunday School, Robertto	Public Hall, Gomersal		Valley Road, Littletown, Liversedge		Valley Road, Littletown, Liversedge	Valley Road, Littletown, Liversedge	•	Elm Bank, Cleckheaton		Elm Bank, Cleckheaton	Valley Road, Littletown, Liversedge		Vallev Road, Littletown, Liversedge	Flm Bank, Cleckheaton	Ings Grove, Mirfield	Elm Bank, Cleckheaton		Elm Bank, Cleckheaton	Elm Bank, Cleckheaton	Elm Bank, Cleckheaton	Valley Road, Littletown, Liversedge	Churchill Hall, Birkenshaw	Liberal Club, Hightown		Valley Road, Littletown, Liversedge
		:	:	•	:	Post-Natal	:	:	:	:	:	:	:	:	:		:	:	:	:		:	:	:	pple's		•	Spen- lanning	
	: :	:	:	:			:		:	:	:	:	:	:	:		:	:	:	:		:	:	ics	Old People's		:	un by nily P	:
Name.	Child Welfare Clinic Do		Do.			Combined Ante-Natal and	Clinics	Do.	Ultra Violet Light Clinic	Do	School Clinic	Paediatric Clinic	Ophthalmic Clinic	Do	Speech Therapy Clinic		Chiropody Clinic	Do	Child Guidance Clinic	Physiotherapy Clinic		Dental Clinic	Young Mothers' Club		sh s	Welfare Committee)	do	Family Planning Clinic (Run by Spen- borough and District Family Planning	Association)

HEALTH TALKS GIVEN TO SENIOR GIRLS AT THE SECONDARY MODERN SCHOOLS.

The syllabus deals in the main with physiology and development, life experiences and fundamental health principles in the period from conception to adolescence.

The Objectives.

- 1. To train the girls to take an intelligent and informed interest in the everyday matters pertaining to health which are familiar to most of them, e.g., in diet, personal hygiene, exercise, rest and clothing.
- 2. To instruct them in basic health principles relating to the care of infants and young children and their day to day management. To give them interest in the management and development of others within their own homes or neighbourhood, and as some slight preparation for future motherhood.
- 3. To impart knowledge of the physiological changes concerned with menstruation and conception and their significance. Personal care during these incidents.
- 4. To indicate common causes of illness in infancy and childhood. The significance of such illness and measures taken for prevention.
- 5. Incidence and types of accidents in the home, their causes, methods of prevention and minor first aid treatment.
- 6. To impart knowledge concerning Health Services available to the public.

First Term:

- 1. Introduction to Parentcraft. What makes good parents and homes. Explain briefly the scope of the talks to the girls. Elementary facts about babies and their normal development.
- 2. How to dress a baby—Demonstrate dressing and undressing.
- 3. Layette—types of garments. Show good and bad clothing. Washing woollies and napkins. Show samples of different types of materials used for making baby clothes and discuss briefly the advantages and disadvantages of each.
- 4. How to bath a baby. Talk and demonstrate.
- 5. Why we wash baby's head and face first—Emphasise that baby's mouth does not need washing. Special emphasis on drying the creases—powder not necessary.

 Correct way to make up baby's cot—position in bedroom. Why baby should not sleep with parents.

6. The feeding of a baby—particular reference to breast feeding—make girls realise that breast feeding must be really tried before any other food is thought of—right and wrong places to seek advice.

Advantages of Health Visitors and Infant Welfare Clinics.

7. Preparation for breast feeding and Ante-Natal Care.
Health of the mother—clothing, food, fresh air, rest, sleep and exercise.
Advantages of Ante-Natal Clinics and Ante-Natal classes.

- 8. Menstruation and Female reproductive organs. Why girls have a menstrual period and what really happens when menstruation takes place. Hygiene of menstruation.

 Bathing, etc., during a period—need of cleanliness.
- 9. Male reproductive organs. Where the male sperm cell is made. Life begins from the union of a male and female egg cell.

 Brief explanation to girls—pointing out that intercourse must only take place after marriage. Sanctity of human body.
- 10. Growth of the baby in the uterus and the birth of the baby.
- 11. Film strip "Human reproduction."
 Discussion with girls.
 For the rest of the term revise previous lectures—quizzing, etc.

Second Term.

- 1. Revise briefly the early development of the baby up to six months. Discuss the general management of the child—Regular hours—Use of prams—Rest for mother during the day. Walks in country not towns. Play before evening meal. Precautions against accidents.
- 2. How to maintain a child's health.
- 3. Fresh air. Sunlight. Rest and sleep.
- 4. Cleanliness. Exercise. Excretion.
- 5. Weaning—mention bottle feeding, cleanliness in preparing feeds, care of teats and bottles.

 Dummy.
- 6. Illnesses which young babies may have.
- 7. Teething troubles. Gastro-enteritis. Colds. Bronchitis. Pneumonia.
- 9. Vaccination and Immunisation. Smallpox. Diphtheria. Whooping Cough.

- 10. Development of a child up to 5 years.

 Teeth. Speech. Mental and Physical development.

 Toys. Diet. Deficiency diseases.
- 11. Clothing for toddlers. Winter and Summer. Show good and bad clothes and shoes.
- 12. Habit and character training.
- 13. General revision of the term's work.

Third Term.

- Starting school and School Medical Services.
 School Medical Inspections.
 Services the school medical services can offer under the Education Act.
- 2. Infection and how it is carried.
- 3. Diseases school children are likely to develop.
 Colds. Measles. German Measles. Chickenpox.
 Mumps. Whooping Cough. Scarlet Fever. Tonsillitis.
 Brief description of the early signs and symptoms of these diseases and the general nursing care.
- 4. How to keep a school child healthy.
 - 5. Clothing. Exercise. Fresh Air, etc.
 - 6. Care of Skin (Impetigo. Heat spots. Acne).

 ", Teeth (Illustrate with demonstration material from Clinic).

 ", Hair (Infestation. D.D.T. and Sacker comb).

 ", Feet (Shoes—corns, veruccae, etc.).

 Rest and sleep.
 - 7. How the Body works.
 - 8. Skeleton.
 - 9. Central nervous system.

 Heart and circulation of blood.

 Respiratory system.

 Digestion of Food.
- 10. Nursing in the home and practical nursing hints.
- 11. Family medicine cupboard. What to do in an emergency.
- 12. Burns and scalds. Application of dressings. Bandaging.

STAFF OF THE HEALTH DEPARTMENT

Medical Staff.

WILLIAM M. DOUGLAS, M.B., Ch.B., D.P.H. Medical Officer of Health.
Divisional Medical Officer.

Public Health Inspector's Staff.

- J. F. TEMPLEMAN, Chief Public Health Inspector, Cleansing Officer and Market Superintendent. Testamur of the Institute of Public Cleansing. Certificate for the Inspection of Meat and Other Foods.
- J. BROWN, Deputy Chief Public Health Inspector. Certificate for the Inspection of Meat and Other Foods. Diploma in Sanitary Science as applied to Buildings and Public Works.

Additional Sanitary Inspectors.

G. M. GILMORE.

- J. P. BARTON, Certificate for the Inspection of Meat and Other Foods. Smoke Inspector's Certificate. Diploma in Sanitary Science as applied to Buildings and Public Works.
- W. A. JOHNSTON, Certificate for the Inspection of Meat and Other Foods. Smoke Inspector's Certificate.
- R. THORNTON, Student Public Health Inspector.

Mrs. M. LEAR, Clerk, Public Health Inspector's Section.

Medical Staff.

DONALD J. ROBERTS, M.B., B.Chir., D.P.H., Assistant County Medical Officer.

ROBERT STALKER, M.B., Ch.B., Assistant County Medical Officer. (Commenced 10th February, 1958).

Clerical Staff.

Mr. P. MARSHALL, D.P.A., Chief Clerk.

Miss G. M. HARTLEY

Mrs. M. HAYNES. (Resigned 31st March, 1958).

Miss N. HOLLIDAY.

Miss A. JOHNSON.

Mrs. V. THEWLIS.

Mrs. E. M. THOMIS.

Mr. G. RISHMAN

Miss N. RYDER. (Commenced 9th June, 1958).

Health Visitors (Part-time School Nurses).

Miss D. DAY, S.R.N., S.C.M., H.V. Cert. of R.S.I., Senior Health Visitor.

Miss M. GREENHOUGH, S.R.N., S.C.M., H.V. Cert. of R.S.I.

Miss M. HARTLEY, S.R.N., S.C.M., H.V. Cert. of R.S.I. (Resigned 23rd March, 1958).

Miss C. JANSE, S.R.N., S.C.M., H.V. Cert. of R.S.I.

Miss D. A. LEAKE, S.R.N., S.C.M., H.V. Cert. of R.S.I.

Mrs. D. PICKUP, S.R.N., S.C.M., H.V.Cert of R.S.I.

Mrs. M. RAYNER, S.R.N., S.C.M., H.V. Cert. of R.S.I.

Miss A. SEELIG, S.R.N., S.C.M., H.V. Cert. of R.S.I.

Assistant Health Visitors (Temp. School and Clinic Nurses).

Mrs. G. MARSHALL, S.R.N.

Mrs. E. I. SMITH, S.R.N.

Mrs. B. J. ROBINSON, S.R.N. (Commenced 12.5.58—Resigned 6.12.58).

Midwives.

Miss C. I. BROADLEY, S.R.N., S.C.M. Queen's Nurse. (Resigned 13th September, 1958).

Mrs. D. M. GOMERSALL, S.R.N., S.C.M.

Miss B. HEPPLESTON, S.R.N., S.C.M.

Mrs. C. MOFFAT, C.M.B. (Commenced 22nd September, 1958).

District Nurses.

Miss F. E. GAMBLE, S.R.N., Queen's Nurse, Senior Relief Nurse.

Miss B. J. CASSIDY, S.R.N., Queen's Nurse.

Miss F. METCALFE, S.R.N., C.M.B., Queen's Nurse.

Miss E. PHILLIPS, S.R.N., Queen's Nurse.

Mrs. E. SAYLES, S.R.N., S.C.M.

Miss W. SPENCER, S.R.N., S.C.M.H.V., Cert. of R.S.I., Queen's Nurse.

Miss A. LODGE, S.R.N., C.M.B., Queen's Nurse.

Miss C. LATIMER, S.R.N., C.M.B., Queen's Nurse.

Dental Staff.

Mr. H. TAYLOR, L.D.S., Assistant County Dental Officer.

Miss J. M. MASON, Dental Attendant. (Commenced 13th January, 1958).

Child Guidance Clinic.

Dr. S. M. LEESE, County Psychiatrist.

Mr. D. G. PICKLES, Educational Psychologist.

Part-time Staff.

Mr. B. D. VAINES, M.Ch.S., Chiropodist.

Miss D. RENDER, M.C.S.P., Physiotherapist.

Mr. L. WITTELS, M.D. (Vienna), D.O., Consultant Ophthal-mologist.

Mrs. M. M. DE LA COUR, Mental Health Social Worker.

Mrs. M. E. TOWELL, Teacher of Mental Defectives.

Mr.I. F. ASH, L.D.S., Assistant County Dental Officer, (Mirfield).



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